

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000071184

Entity Name: BAYFRONT ESTATES, LLC

FILED
Mar 22, 2009
Secretary of State

Current Principal Place of Business:

C/O J. MATTHEW MARQUARDT, ESQ.
625 COURT STREET, SUITE 200
CLEARWATER, FL 33756

Current Mailing Address:

C/O J. MATTHEW MARQUARDT, ESQ.
625 COURT STREET, SUITE 200
CLEARWATER, FL 33756

New Principal Place of Business:

C/O KATHY MCKINNON
2307 BAY BOULEVARD, #1
INDIAN ROCKS BEACH, FL 33785

New Mailing Address:

MARK R. MOLEPSKE
3430 N LAKE SHORE DRIVE, #9L
CHICAGO, IL 60657

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARQUARDT, J. MATTHEW
625 COURT STREET, SUITE 200 Q.
CLEARWATER, FL 33756 US

Name and Address of New Registered Agent:

MOLEPSKE, MARK R MGR
2307 BAY BOULEVARD
#1
INDIAN ROCKS BEACH, FL 33785 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: MARK R. MOLEPSKE

03/22/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: MOLEPSKE, MARK R
Address: C/O J. MATTHEW MARQUARDT, ESQ.
City-St-Zip: CLEARWATER, FL 33756

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: MOLEPSKE, MARK R
Address: 3430 N LAKE SHORE DRIVE, #9L
City-St-Zip: CHICAGO, IL 60657

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: MARK R. MOLEPSKE

MGR

03/22/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date