

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000095333

FILED
Sep 04, 2008
Secretary of State

Entity Name: BAY BREEZE PARTNERS, LLC

Current Principal Place of Business:

411 SEA BREEZE AVENUE
PALM BEACH, FL 33480

New Principal Place of Business:

411 SEABREEZE AVENUE
PALM BEACH, FL 33480

Current Mailing Address:

411 SEA BREEZE AVENUE
PALM BEACH, FL 33480

New Mailing Address:

FEI Number: 56-2531554 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

KASS, DOUGLAS
411 SEA BREEZE AVENUE
PALM BEACH, FL 33480 US

Name and Address of New Registered Agent:

KASS, DOUGLAS
411 SEABREEZE AVENUE
PALM BEACH, FL 33480 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: DOUGLAS KASS

09/04/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: KASS, DOUGLAS A
Address: 411 SEA BREEZE AVENUE
City-St-Zip: PALM BEACH, FL 33480

Title: MGRM () Delete
Name: LUNEBURG, DONALD
Address: P.O. BOX 271
City-St-Zip: OLD BETHPAGE, NY 11804

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: KASS, DOUGLAS A
Address: 411 SEABREEZE AVENUE
City-St-Zip: PALM BEACH, FL 33480

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: DOUGLAS KASS

MGRM

09/04/2008

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