2008 LIMITED LIABILITY COMPANY ANNUAL REPORT.

DOCUMENT # L05000096170

1. Entity Name

BAYBORO TOWER LLC

FILED
Jan 11, 2008 08:00 AN
Secretary of State

Principal Place of Business

Mailing Address

150 SECOND AVENUE NORTH STE 770 ST. PETERSBURG, FL 33701

150 SECOND AVENUE NORTH STE 770 ST. PETERSBURG, FL 33701



01092008 No Chg-LLC

CR2E083 (12/07)

| 4. FEI Number 86-1147971 | Applied For Not Applicable |
|----------------------------------|-------------------------------|
| 00-1147971 | |
| 5. Certificate of Status Desired | \$5.00 Additional |

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

WATERBURY, JOSEPH MARK 150 SECOND AVENUE NORTH STE 770 ST. PETERSBURG, FL 33701

DO NOT WRITE IN THIS SPACE

| | named entity submits this statement for the purpose of char ions of registered agent. | nging its registered office or registered agent, or bo | th, in the State of Florida. I am familiar with, and accept |
|--|---|--|---|
| SIGNATURE. | Signature, typed or printed name of registered agent and title if applicable | (NOTE: Registered Agent signature required when reinstating) | DATE |
| | NOW!!! FEE IS \$138.75 / 1, 2008 Fee will be \$538.75 | | |
| 9. | MANAGING MEMBERS/MANAGERS | * | , - |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGRM WATERBURY, JOSEPH M PRESIDE 150 SECOND AVENUE NORTH STE 770 ST. PETERSBURG, FL 33701 | | U00000730311 01/14/08-80016-022 138.75 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGRM SAMUELS, SCOTT 150 SECOND AVENUE NORTH STE 770 ST. PETERSBURG, FL 33701 | | 01714708-80016-022 138.75 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGRM STEELE, JON T 150 SECOND AVENUE NORTH STE 770 ST PETERSBURG, FL 33701 | DO | NOT WRITE |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | IN ' | THIS SPACE |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | |

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: _____

SIGNATURE AND TYPED OR PAINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

1-9-208

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