2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 25, 2006
Secretary of State

DOCUMENT# L05000118966

Entity Name: BAYVIEW, LLC

Current Principal Place of Business:

990 17TH AVENUE SOUTH
NAPLES, FL 34102

New Principal Place of Business:

1032 GOODLETTE ROAD NORTH
NAPLES, FL 34102

Current Mailing Address:

990 17TH AVENUE SOUTH
NAPLES, FL 34102

New Mailing Address:

1032 GOODLETTE ROAD NORTH
NAPLES, FL 34102

FEI Number: 20-4603802 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BRAKEFIELD, LENORE T
4001 TAMIAMI TRAIL NORTH, SUITE 250
NAPLES, FL 34103 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: BUCCHEL, JEANNE T
Address: 990 17TH AVENUE SOUTH
City-St-Zip: NAPLES, FL 34102

Title: MGRM ( ) Delete
Name: BUECHEL, FREDERICK F JR MD
Address: 990 17TH AVENUE SOUTH
City-St-Zip: NAPLES, FL 34102

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: BUCCHEL, JEANNE T
Address: 1032 GOODLETTE ROAD NORTH
City-St-Zip: NAPLES, FL 34102

Title: MGRM (X) Change ( ) Addition
Name: BUECHEL, FREDERICK F JR MD
Address: 1032 GOODLETTE ROAD NORTH
City-St-Zip: NAPLES, FL 34102

I hereby certify that the information supplied with this filing does not qualify for the 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: JEANNE BUECHEL MGRM 04/25/2006

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