

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000119742

Entity Name: DUVAL BAY, LLC

FILED
Apr 24, 2009
Secretary of State

Current Principal Place of Business:

3277 FRUITVILLE ROAD, BLDG. B
SARASOTA, FL 342376410 US

New Principal Place of Business:

Current Mailing Address:

3277 FRUITVILLE ROAD, BLDG. B
SARASOTA, FL 342376410

New Mailing Address:

3277 FRUITVILLE ROAD, BLDG. B
SARASOTA, FL 342376410 US

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BAY SYSTEMS, INC.
3277 FRUITVILLE RD
BLDG B
SARASOTA, FL 34237 US

Name and Address of New Registered Agent:

GRSZEWSKI, MARK L MR
3277 FRUITVILLE RD
BLDG B
SARASOTA, FL 34237 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 L. GRSZEWSKI

04/24/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: BAY SYSTEMS, INC.
Address: 3277 FRUITVILLE RD., BUILDING B
City-St-Zip: SARASOTA, FL 34237

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MR. (X) Change () Addition
Name: GRSZEWSKI, MARK L MR
Address: 3277 FRUITVILLE RD., BUILDING B
City-St-Zip: SARASOTA, FL 34237

Title: MS () Change (X) Addition
Name: WUNDERLIN, PATRICIA A MS
Address: 3277 FRUITVILLE RD, BLDG B
City-St-Zip: SARASOTA, FL 34237 US

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 L. GRSZEWSKI

MR.

04/24/2009

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