

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000034823

FILED
Apr 20, 2009
Secretary of State

Entity Name: BAY BEACH DOCKS, LLC

Current Principal Place of Business:

6704 LONE OAK BLVD.
NAPLES, FL 34109

New Principal Place of Business:

2240 VENETIAN CT
NAPLES, FL 34109

Current Mailing Address:

6704 LONE OAK BLVD.
NAPLES, FL 34109

New Mailing Address:

PO BOX 10489
NAPLES, FL 34109

FEI Number: 20-8436926

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STERLING, JOHN J
6704 LONE OAK BLVD.
NAPLES, FL 34109 US

Name and Address of New Registered Agent:

STERLING, JOHN J
2240 VENETIAN CT
NAPLES, FL 34109 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: JOHN STERLING

04/20/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: CLAUSSEN, ROBERT G
Address: 6704 LONE OAK BLVD.
City-St-Zip: NAPLES, FL 34109

Title: MGRM () Delete
Name: CLAUSSEN, CHRISTOPHER G
Address: 6704 LONE OAK BLVD.
City-St-Zip: NAPLES, FL 34109

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: CLAUSSEN, ROBERT G
Address: 2240 VENETIAN CT
City-St-Zip: NAPLES, FL 34109

Title: MGRM (X) Change () Addition
Name: CLAUSSEN, CHRISTOPHER G
Address: 2240 VENETIAN CT
City-St-Zip: NAPLES, FL 34109

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: ROBERT G. CLAUSSEN

D

04/20/2009

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