

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 31, 2008 08:00 AM
Secretary of State

DOCUMENT # L06000036988

1. Entity Name
202 BAYSIDE DRIVE, LLC



Principal Place of Business
% VINCENT AND KATHY LOWE
7415 WILLOW BROOK DRIVE
SPRINGHILL, FL 34606

Mailing Address
% VINCENT AND KATHY LOWE
7415 WILLOW BROOK DRIVE
SPRINGHILL, FL 34606



01042008 No Chg-LLC

CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number
NOT APPLICABLE

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

LOWE, VINCENT
% VINCENT AND KATHY LOWE
7415 WILLOW BROOK DRIVE
SPRINGHILL, FL 34606

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reappointing)

DATE

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$338.75

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGRM
LOWE, VINCENT
7415 WILLOW BROOK DRIVE
SPRINGHILL,

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGRM
LOWE, KATHY
7415 WILLOW BROOK DRIVE
SPRINGHILL,

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
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STREET ADDRESS
CITY-ST-ZIP

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NAME
STREET ADDRESS
CITY-ST-ZIP

000000873848

04/10/08-80096-007 138.75

**DO NOT WRITE
IN THIS SPACE**

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: *Vincent F. Lowe* Vincent F. Lowe

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

3/27/08

Date

Daytime Phone #

352-686-0961