

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000020884

FILED
Aug 07, 2008
Secretary of State

Entity Name: BAY AREA CUSTOM BUILDERS, LLC

Current Principal Place of Business:

13804 LINDEN DRIVE
SPRING HILL, FL 34609

New Principal Place of Business:

Current Mailing Address:

13804 LINDEN DRIVE
SPRING HILL, FL 34609

New Mailing Address:

FEI Number: 22-3954761 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 US

Name and Address of New Registered Agent:

LUIS RIERA
13804 LINDEN DRIVE
SPRING HILL, FL 34609 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: LUIS RIERA

08/07/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: RIERA, LUIS
Address: 13804 LINDEN DRIVE
City-St-Zip: SPRING HILL, FL 34609

Title: MGR () Delete
Name: SANTINI, IVELYN
Address: 13804 LINDEN DRIVE
City-St-Zip: SPRING HILL, FL 34609

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGRM (X) Change () Addition
Name: SANTINI, IVELYN
Address: 13804 LINDEN DRIVE
City-St-Zip: SPRING HILL, FL 34609

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: LUIS RIERA

MGR

08/07/2008

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