

# **2011 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L09000033633

**FILED**  
**Aug 08, 2011**  
**Secretary of State**

**Entity Name:** BAYSIDE CONSULTING GROUP OF NORTHWEST FLORIDA, LLC

**Current Principal Place of Business:**

3802 NORTH S STREET  
PENSACOLA, FL 32505

**New Principal Place of Business:**

**Current Mailing Address:**

3802 NORTH S STREET  
PENSACOLA, FL 32505

**New Mailing Address:**

**FEI Number:** 30-0558666

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

PUGH, PHILLIP A  
30 S. SPRING STREET  
PENSACOLA, FL 32502 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: MGR  
Name: MONIE, TINA S  
Address: 4227 N. DAVIS HIGHWAY  
City-St-Zip: PENSACOLA, FL 32503

Title: MGR  
Name: HAMMOND, THOMAS G  
Address: 3802 NORTH S STREET  
City-St-Zip: PENACAOLA, FL 32505

Title: MGR  
Name: FITZPATRICK, DAVID W  
Address: 10250 N PALAFOX STREET  
City-St-Zip: PENSACOLA, FL 32534

I hereby 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: THOMAS G HAMMOND

MGR

08/08/2011

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