

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000057697

Entity Name: BAY & BEACH CAB, LLC

**FILED**  
**Apr 29, 2012**  
**Secretary of State**

## **Current Principal Place of Business:**

201 N. FRANKLIN STREET  
SUITE 2000  
TAMPA, FL 33602 US

## **New Principal Place of Business:**

2003 W KENNEDY BLVD  
SUITE B  
TAMPA, FL 33606 US

## **Current Mailing Address:**

201 N. FRANKLIN STREET  
SUITE 2000  
TAMPA, FL 33602 US

## **New Mailing Address:**

2003 W KENNEDY BLVD  
SUITE B  
TAMPA, FL 33606 US

FEI Number: 27-2699721

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ANNIS, NATALIE C  
201 N. FRANKLIN STREET, STE. 2000  
TAMPA, FL 33602 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: MPT  
Name: MOSES, MICHAEL J  
Address: 201 N. FRANKLIN STREET, STE 2000  
City-St-Zip: TAMPA, FL 33602 US

Title: MS  
Name: CASTELLANO, NANCY J  
Address: 201 N. FRANKLIN STREET, STE 2000  
City-St-Zip: TAMPA, FL 33602 US

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: MICHAEL J MOSES

MPT

04/29/2012

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