2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE: DAUG LINE EN LO DIVINO MANAGING MEMBER, MAN 4GER, OR AUTHORIZED REPRESENTATIVE

DOCU	IMENT#	L9500	0000846						FILE)	
1. Entity Name BAYWALL HOLDINGS, L.C.								OI APR	27 A	M IO:-24	3
	,										
- Principal Plac	ce of Business		Mailing Address					SECRET TALEAHA	SSEE.	FLORIC	Ā
			P.O. BOX 2055 LUTZ FL 33548-2055								
2012 12 000	710 2000		20,2 (2 000 10 2000	i				a i a ghi ar hi ai mi		e da erir i (e da)	11111 2 111 1 12 1
2. Principal f	Place of Business	·	3. Mailing Address			_					
2. Principal Place of Business Suite, Apt. #, etc.			Suite, Apt. #, etc.					O NOT WOITE			
							D	O NOT WRITE	IN THIS S		
City & State			City & State			4. FEI I	4. FEI Number 59-3351157 Applied For Not Applicable				
Zip	Count	гу	Zip	Counti	ry	5. Cert	ificate of Statu	ıs Desired		5.00 Add	
	6. Name and Ad	dress of Current	Registered Agent		Name	7. Nam	e and Addres	ss of New Reg			
ROBINSO	ON, DOUGLAS E					ess (P.O. Box N	lumber is Not	Acceptable		·	- ,
	GHLAND RIDGE HW	Υ.			Sliget Addie	555 (F.O. BOX 1		Acceptable)			
	1 00047										
IAMPA P	FL 33647				City				C I	Zip Cod	9
3. The above			the purpose of changing its	_		istered agent,	ing)		DATE	Zip Cod	
3. The above	e named entity submits		nd title if epplicable. (NOT	Registered	Agent signature rec	quired when reinstat	ing)	State of Florid 1142 -05/15/0 *****55	DATE 18:	338-	
3. The above	e named entity submits Signature, typed or printed na		rid title if applicable. (NOT FILE N Make Check Pa	Registered	Agent signature rec	quired when reinstat	ing) 800	0042 -05/15/0	DATE 18:- 1-01 .00	333- 1460 *****5	——3 113 5.00
3. The above SIGNATURE 0. IIILE AME TREET ADDRESS	e named entity submits Signature, typed or printed not MGRM ROBINSON, DOU P.O. BOX 2055	ume of registered agent a	rid title if applicable. (NOT FILE N Make Check Pa	Registered WIII F Able to 10. TITLE NAME	Agent signature rec EE IS \$50. Departmen	quired when reinstat	ing) 800	0042 -05/15/0 *****55	DATE 18:- 1-01 .00	338- 1460	
3. The above SIGNATURE 3. IITLE IAME STREET ADDRESS SITY-ST-ZIP	MGRM ROBINSON, DOU P.O. BOX 2055 LUTZ FL 33548-2	ume of registered agent a NAGING MEMBE GLAS E	rid title if epplicable. (NOT FILE N Make Check Pa	Registered Will F Able to TITLE NAME STREET CITY-S	Agent signature rec EE IS \$50. Departmen	quired when reinstat	ing) 800	0042 -05/15/0 *****55	DATE 18: 1-01.00	333- 1460 *****5	——3 113 5.00
3. The above SIGNATURE 3. IITLE IAME STREET ADDRESS DITY-ST-ZIP TITLE VAME STREET ADDRESS	MGRM ROBINSON, DOU P.O. BOX 2055 LUTZ FL 33548-2 MGRM ROBINSON, DAVI P.O. BOX 2055	ame of registered agent a ANAGING MEMBE GLAS E 055	FILE N Make Check Pa	Registered Will F Able to TITLE NAME STREET NAME STREET	Agent signature rec EE IS \$50. Department T ADDRESS ST-ZIP	quired when reinstat	ing) 800	0042 -05/15/0 *****55	DATE 18: 1-01.00	3:3:3- 1460 ******5	——3 113 5.00
3. The above SIGNATURE 3. ITLE IAME ITREET ADDRESS ITY-ST-ZIP ITLE IAME	MGRM ROBINSON, DOU P.O. BOX 2055 LUTZ FL 33548-2 MGRM ROBINSON, DAVI	ame of registered agent a ANAGING MEMBE GLAS E 055	FILE N Make Check Pa	Registered Will F Able to TITLE NAME STREET CITY-S TITLE NAME	Agent signature rec EE IS \$50. Department T ADDRESS ST-ZIP	quired when reinstat	ing) 800	0042 -05/15/0 *****55	DATE 18:-01.00 HANGES	3:3:3- 1460 ******5	——3 113 5.00
3. The above SIGNATURE 3. ITLE IAME STREET ADDRESS CITY-ST-ZIP TITLE IAME ITLE IAME ITLE IAME ITLE IAME ITLE IAME ITLE IAME	MGRM ROBINSON, DOU P.O. BOX 2055 LUTZ FL 33548-2 MGRM ROBINSON, DAVI P.O. BOX 2055	ame of registered agent a ANAGING MEMBE GLAS E 055	RS/MEMBERS Delete Delete	TO Registered Able to TITLE NAME STREET CITY-S TITLE NAME STREET CITY-S TITLE NAME STREET CITY-S	Agent signature rec EE IS \$50. Departmen T ADDRESS ST-ZIP T ADDRESS ST-ZIP	quired when reinstat	ing) 800	0042 -05/15/0 *****55	DATE 18:-01.00 HANGES	333- 146(******5 □ Change	
3. The above SIGNATURE 3. IITLE IAME STREET ADDRESS CITY-ST-ZIP TITLE IAME STREET ADDRESS CITY-ST-ZIP TITLE IAME STREET ADDRESS CITY-ST-ZIP TITLE IAME STREET ADDRESS CITY-ST-ZIP	MGRM ROBINSON, DOU P.O. BOX 2055 LUTZ FL 33548-2 MGRM ROBINSON, DAVI P.O. BOX 2055	ame of registered agent a ANAGING MEMBE GLAS E 055	RS/MEMBERS Delete Delete	Registered NAME STREET CITY-S TITLE	Agent signature rec EE IS \$50. Departmen T ADDRESS ST-ZIP T ADDRESS ST-ZIP	quired when reinstat	ing) 800	0042 -05/15/0 *****55	DATE 18:- 1-01 .00	333- 146(******5 □ Change	
SIGNATURE 3. SIGNATURE 3. SITLE NAME STREET ADDRESS CITY-ST-ZIP STREET ADDRESS STREET ADDRESS	MGRM ROBINSON, DOU P.O. BOX 2055 LUTZ FL 33548-2 MGRM ROBINSON, DAVI P.O. BOX 2055	ame of registered agent a ANAGING MEMBE GLAS E 055	RS/MEMBERS Delete Delete	TREGISTORED TO. TITLE NAME STREET CITY-S TITLE NAME STREET NAME STREET	Agent signature rec EE IS \$50. Departmen T ADDRESS ST-ZIP T ADDRESS ST-ZIP T ADDRESS ST-ZIP	quired when reinstat	ing) 800	0042 -05/15/0 *****55	DATE 18:- 1-01 .00	3.363- 146(***********************************	Addition
9. TITLE HAME STREET ADDRESS CITY-ST-ZIP TITLE VAME STREET ADDRESS CITY-ST-ZIP	MGRM ROBINSON, DOU P.O. BOX 2055 LUTZ FL 33548-2 MGRM ROBINSON, DAVI P.O. BOX 2055	ame of registered agent a ANAGING MEMBE GLAS E 055	RS/MEMBERS Delete Delete	TREGISTORED TO THE NAME STREET CITY-S TITLE	Agent signature rec EE IS \$50. Departmen T ADDRESS ST-ZIP T ADDRESS ST-ZIP T ADDRESS ST-ZIP	quired when reinstat	ing) 800	0042 -05/15/0 *****55	DATE 18:01-01.00 HANGES	3.363- 146(***********************************	
9. TITLE HAME STREET ADDRESS CITY-ST-ZIP TITLE HAME HAME HAME HAME HAME HAME HAME HAM	MGRM ROBINSON, DOU P.O. BOX 2055 LUTZ FL 33548-2 MGRM ROBINSON, DAVI P.O. BOX 2055	ame of registered agent a ANAGING MEMBE GLAS E 055	RS/MEMBERS Delete Delete Delete	TREGISTORED TO ADDIE TO TITLE NAME STREET CITY-S	Agent signature rec EE IS \$50. Departmen T ADDRESS ST-ZIP T ADDRESS ST-ZIP T ADDRESS ST-ZIP	quired when reinstat	ing) 800	0042 -05/15/0 *****55	DATE 18:01-01.00 HANGES	146(***** Change Change	Addition
SIGNATURE 9. ITILE VAME STREET ADDRESS CITY-ST-ZIP ITILE VAME STREET ADDRESS CITY-ST-ZIP	MGRM ROBINSON, DOU P.O. BOX 2055 LUTZ FL 33548-2 MGRM ROBINSON, DAVI P.O. BOX 2055	ame of registered agent a ANAGING MEMBE GLAS E 055	RS/MEMBERS Delete Delete Delete	Registered	Agent signature rec EE IS \$50. Departmen T ADDRESS ST-ZIP T ADDRESS ST-ZIP I ADDRESS ST-ZIP	quired when reinstat	ing) 800	0042 -05/15/0 *****55	DATE 18:-01.00 HANGES	146C ***** Change Change	Addition Addition
<u></u>	MGRM ROBINSON, DOU P.O. BOX 2055 LUTZ FL 33548-2 MGRM ROBINSON, DAVI P.O. BOX 2055	ame of registered agent a ANAGING MEMBE GLAS E 055	RS/MEMBERS Delete Delete Delete	Registered	Agent signature rec EE IS \$50. Departmen T ADDRESS ST-ZIP T ADDRESS ST-ZIP I ADDRESS ST-ZIP	quired when reinstat	ing) 800	0042 -05/15/0 *****55	DATE 18:-01.00 HANGES	146(***** Change Change	