

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L95000000846

FILED
Apr 14, 2008
Secretary of State

Entity Name: BAYWALL HOLDINGS, L.C.

Current Principal Place of Business:

851 ISLEBAY DRIVE
APOLLO BEACH, FL 33572

New Principal Place of Business:

11201 WEST WATERS AVENUE
TAMPA, FL 33635

Current Mailing Address:

P.O. BOX 2055
LUTZ, FL 335482055

New Mailing Address:

FEI Number: 59-3351157 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ROBINSON, DAVID G
851 ISLEBAY DRIVE
APOLLO BEACH, FL 33572 US

Name and Address of New Registered Agent:

ROBINSON, DAVID G
11201 WEST WATERS AVENUE
TAMPA, FL 33635 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: _____

04/14/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: ROBINSON, DOUGLAS E
Address: P.O. BOX 2055
City-St-Zip: LUTZ, FL 335482055

Title: MGRM () Delete
Name: ROBINSON, DAVID G
Address: P.O. BOX 2055
City-St-Zip: LUTZ, FL 335482055

Title: T () Delete
Name: ROBINSON, JOHNETTE L
Address: PO BOX 2055
City-St-Zip: LUTZ, FL 335482055 US

ADDITIONS/CHANGES:

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

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

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

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: DAVID ROBINSON

MGRM

04/14/2008

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