

**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 24, 2007 08:00 AM
Secretary of State

DOCUMENT # L96000001251

1. Entity Name
BAY HARBOUR MANAGEMENT, L.C.,



Principal Place of Business
**10124 FOXHURST CT
ORLANDO, FL 32836**

Mailing Address
**10124 FOXHURST CT
ORLANDO, FL 32836**



02092007No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3418243

Applied For
Not Applicable

5. Certificate of Status Desired

☒ **\$5.00 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**VAN DYKE, STEVEN A
10124 FOXHURST CT
ORLANDO, FL 32836**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**Filing Fee is \$50.00
Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGR
VAN DYKE, STEVEN A
10124 FOXHURST CT
ORLANDO, FL 32836**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGR
TEITELBAUM, DOUGLAS P
885 THIRD AVENUE, 34TH FLOOR
NEW YORK, NY 10022**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

U000000728561
05/08/07-80002-009 55.00

**DO NOT WRITE
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

4-19-07

Date

212 371 2211

Daytime Phone #