

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M02000002316

FILED
Apr 19, 2007
Secretary of State

Entity Name: BAYSIDE/RIVERSIDE PROPERTIES, LLC

Current Principal Place of Business:

300 N GREENE ST, SUITE 1000
GREENSBORO, NC 27401

New Principal Place of Business:

Current Mailing Address:

300 N GREENE ST, SUITE 1000
GREENSBORO, NC 27401

New Mailing Address:

FEI Number: 30-0120828

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STEVEN D. BELL & COMPANY
333 16TH AVENUE SE
LARGO, FL 33771 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: MGRM () Delete
Name: BELL, STEVEN D
Address: 300 N GREENE ST, SUITE 1000
City-St-Zip: GREENSBORO, NC 274011539

Title: MGRM () Delete
Name: ALLISON, D. SHOFFNER
Address: 300 N GREENE ST, SUITE 1000
City-St-Zip: GREENSBORO, NC 274011539

Title: MGRM () Delete
Name: JOHN M. AND FLAVEL M. . GODREY
Address: 300 N GREENE ST, SUITE 1000
City-St-Zip: GREENSBORO, NC 274011539

Title: MGRM () Delete
Name: SWAIN, ROBERT D
Address: 300 N GREENE ST, SUITE 1000
City-St-Zip: GREENSBORO, NC 274011539

Title: MGRM () Delete
Name: MCNICHOLS, ROBERT
Address: 300 N GREENE ST, SUITE 1000
City-St-Zip: GREENSBORO, NC 274011539

Title: MGRM () Delete
Name: ROYCE O REYNOLDS REV, OCABLE TRUST
Address: 300 N GREENE ST, SUITE 1000
City-St-Zip: GREENSBORO, NC 274011539

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:

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 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: STEVEN D BELL

MGRM

04/19/2007

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