## **2006 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DO NOT WRITE IN THIS SPACE

**DOCUMENT # M05000006430** 

1. Entity Name BAY HARBOUR HOLDINGS, LLC



Principal Place of Business

885 THIRD AVENUE, 34TH FLOOR NEW YORK, NY 10022

Mailing Address

885 THIRD AVENUE, 34TH FLOOR NEW YORK, NY 10022

## **FILED** Apr 17, 2006 8:00 am Secretary of State

04-17-2006 90046 014 \*\*\*\*55.00



02102006 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 20-3660423

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

**CORPORATION SERVICE COMPANY** 1201 HAYS STREET TALLAHASSEE, FL 32301-2525

## DO NOT WRITE IN THIS SPACE

	named entity submits this statement for the purpose of chan lons of registered agent.	ging its registere	d office or registered agent, or both, in the \$	State of Florida. I am familiar with, a	and accept
SIGNATURE_	Signature, typed or printed name of registered agent and the if applicable.	(NOTE: Registered	Agent signature required when reinstating)	DATE	<del></del>
Fi De	iling Fee is \$50.00 ue by May 1, 2006				
9.	MANAGING MEMBERS/MANAGERS				
TITLE	MGR				
NAME	VAN DYKE, STEVEN A				
STREET ADDRESS	885 THIRD AVENUE, 34TH FLOOR				
CITY-ST-ZIP	NEW YORK, NY 10022				
TITLE	MGR				
NAME	TEITELBAUM, DOUGLAS P				
STREET ADDRESS	885 THIRD AVENUE, 34TH FLOOR				
CITY-ST-ZIP	NEW YORK, NY 10022				
TITLE	MGR				
NAME	STOUT, JOHN D				
STREET ADDRESS	885 THIRD AVENUE, 34TH FLOOR			TWDITE	
CITY-ST-ZIP	NEW YORK, NY 10022		טא טע	T WRITE	
TITLE			IN THIS	SSPACE	
NAME			118 11718	SPACE	
STREET ADDRESS		•			
CITY-ST-ZIP					

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:

TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR ALL