

# **2009 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M06000000379

**FILED**  
**Mar 20, 2009**  
**Secretary of State**

**Entity Name:** BAYSHORE PROPERTIES, LLC

**Current Principal Place of Business:**

263 TRESSER BLVD., STE. 1204  
STAMFORD, CT 06901

**New Principal Place of Business:**

3531 PLANTATION WAY  
NAPLES, FL 34112

**Current Mailing Address:**

263 TRESSER BLVD., STE. 1204  
STAMFORD, CT 06901

**New Mailing Address:**

C/O PCMG  
PO BOX 60195  
FORT MYERS, FL 33906

**FEI Number:** 20-4155659

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CAPITOL CORPORATE SERVICES, INC.  
155 OFFICE PLAZA DR.  
SUITE A  
TALLAHASSEE, FL 32301 US

**Name and Address of New Registered Agent:**

WAYLAND, TERRY R  
12631 WESTLINKS DRIVE  
SUITE 7  
FORT MYERS, FL 33913 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: TERRY WAYLAND

03/20/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: RESTIFO, PHILIP D  
Address: 263 TRESSER BLVD., STE. 1204  
City-St-Zip: STAMFORD, CT 06901

**ADDITIONS/CHANGES:**

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: KIMBERLYANN HOLBROOK

ASST

03/20/2009

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