

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M04000005182

Entity Name: DOLPHIN BAY, LLC

FILED
Feb 10, 2005
Secretary of State

Current Principal Place of Business:

8275 SOUTH EASTERN AVE., SUITE 200
LAS VEGAS, NV 89123

New Principal Place of Business:

Current Mailing Address:

8275 SOUTH EASTERN AVE., SUITE 200
LAS VEGAS, NV 89123

New Mailing Address:

FEI Number: 20-1567635

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

DOWD, JOHN
285 HIGHWAY 98 EAST, SUITE A
DESTIN, FL 32541 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/MEMBERS:

Title: MGRM () Delete
Name: J.B. OXFORD & COMPAN, Y
Address: 8275 SOUTH EASTERN AVE., SUITE 200
City-St-Zip: LAS VEGAS, NV 89123

Title: MGRM () Delete
Name: LOWE, ROBERT W JR.
Address: 5250 VIRGINIA WAY, SUITE 100
City-St-Zip: BRENTWOOD, TN 37027

Title: MGRM (X) Delete
Name: TUCKER, COLLIERS T.M.
Address: 5250 VIRGINIA WAY, SUITE 100
City-St-Zip: BRENTWOOD, TN 37027

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 for the exemption stated in Section 119.07(3)(i), 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: ROBERT W. LOWE, JR.

MGMR

02/10/2005

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