

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000040546

**Entity Name:** BAY AREA MOBILE HOME PARKS, LLC

**Current Principal Place of Business:**

6629 GLENCOE DR  
TEMPLE TERRACE, FL 33617

**Current Mailing Address:**

POB 290849  
TAMPA, FL 33687

**FEI Number:** 45-2506468

**Certificate of Status Desired:** No

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

WELLS, JAMES  
6629 GLENCOE DR  
TEMPLE TERRACE, FL 33617 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Authorized Person(s) Detail :**

Title MGRM  
Name WELLS, JAMES  
Address POB 290849  
City-State-Zip: TAMPA FL 33687

*I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** JAMES M WELLS

MGR

03/01/2016

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date