2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 30, 2004 08:00 AM
Secretary of State

DOCUMENT # L00000001595

1. Entity Name
BEACH VIEW CAPITAL, L.L.C.

Principal Place of Business	Mailing Address
3434 FIDDLERS BEND FERNANDINA BEACH, FL 32034	P.O. BOX 8318 FERNANDINA BEACH, FL 32035-8318

DO NOT WRITE IN THIS SPACE

01242004 No Chg-LLC CR2E083 (10/03)

4. FEI Number
59-3633737
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

BLACKBURN, DENNIS L
BLACKBEARD & COMPANY LLC
5150 BELFORT RD S BLDG 500
JACKSONVILLE, FL 32256

DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ _____ _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $50.00
Due by May 1, 2004

9.	MANAGING MEMBERS/MANAGERS
TITLE	MGR
NAME	WINSHIP, ELIZABETH A
STREET ADDRESS	3434 FIDDLER BEND
CITY-ST-ZIP	FERNANDINA BEACH, FL 32034
TITLE	MGR
NAME	WINSHIP, EMORY S
STREET ADDRESS	8 TURTLE ROCK COURT
CITY-ST-ZIP	TIBUROW, CA 94920
TITLE	MGR
NAME	PARKER, TANNIS W
STREET ADDRESS	188 HARBOR POINT DRAIVE
CITY-ST-ZIP	BRUNSWICK, GA 31523
TITLE	MGR
NAME	WINSHIP, DOUGLAS A
STREET ADDRESS	2200 ASHBURY CLOSE
CITY-ST-ZIP	POWELL, OH 43065
TITLE	MGR
NAME	WINSHIP, J.D. CAMERON
STREET ADDRESS	7911 JAMES ISLAND TRAIL
CITY-ST-ZIP	JACKSONVILLE, FL 32256
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

I00000023431
02/02/04-80025-015 50.00

DO NOT WRITE IN THIS SPACE

11. I hereby certify that the information supplied with this filing does not qualify 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 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: Tannis W Parker Tannis W. Parker 1-24-04 912 265 7710
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #