


2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 22, 2005 08:00 AM
Secretary of State

DOCUMENT # L02000034343

1. Entity Name
BEEMER & ASSOCIATES XX, L.L.C.



Principal Place of Business
**13947 BEACH BLVD., SUITE 210
 JACKSONVILLE, FL 32224**

Mailing Address
**13947 BEACH BLVD., SUITE 210
 JACKSONVILLE, FL 32224**

DO NOT WRITE IN THIS SPACE



02202005No Chg-LLC CR2E083 (10/03)

4. FEI Number
14-1863423

Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

**ASHOURIAN, MIKE
 13947 BEACH BLVD., SUITE 210
 JACKSONVILLE, FL 32224**

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 _____ (NOTE: Registered Agent signature required when re-registering) DATE _____

Filing Fee is \$50.00 Due by May 1, 2005

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM ASHOURIAN, MIKE 13947 BEACH BLVD., SUITE 210 JACKSONVILLE, FL 32224
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03/22/05-20005-022 \$0.00

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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:  **2/18/05 904-990-9002**

SIGNATURE AND TITLE OF REGISTERED AGENT OR CURRENT MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #