2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 02, 2006
Secretary of State

DOCUMENT# L04000045760

Entity Name: BEACHFRONT OWNERS, LLC.

Current Principal Place of Business:

450 N. PARK ROAD
SUITE 502
HOLLYWOOD, FL 33021 US

New Principal Place of Business:

Current Mailing Address:

450 N. PARK ROAD
SUITE 502
HOLLYWOOD, FL 33021 US

New Mailing Address:

FEI Number: 20-1259356 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

EXCLUSIVELY R.E.O. INC.
450 N. PARK ROAD #502
HOLLYWOOD, FL 33021 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/MANAGERS:

Title:	MGR	( ) Delete
Name:	JOBSON, BRIGETTE	
Address:	450 N. PARK ROAD, #502	
City-St-Zip:	HOLLYWOOD, FL 33021	
Title:	MGR	( ) Delete
Name:	TAYLOR, AVIS	
Address:	16882 SW 50TH STREET	
City-St-Zip:	MIRAMAR, FL 33027 US	
Title:	MGR	( ) Delete
Name:	TAYLOR, CLINTON	
Address:	16882 SW 50TH STREET	
City-St-Zip:	MIRAMAR, FL 33027	
Title:	MGR	( ) Delete
Name:	MAGEE, ANGELA	
Address:	955 NW 100TH AVENUE	
City-St-Zip:	PEMBROKE PINES, FL 33024 US	
Title:	MGR	( ) Delete
Name:	MAGEE, VAN	
Address:	955 NW 100TH AVENUE	
City-St-Zip:	PEMBROKE PINES, FL 33024 US	
Title:	MGR	( ) Delete
Name:	MCLUNE, LOUISE	
Address:	16882 SW 50TH STREET	
City-St-Zip:	MIRAMAR, FL 33027	

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:	
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 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: BRIGETTE JOBSON MGR 05/02/2006

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