

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000045760

FILED
May 16, 2007
Secretary of State

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:

Name and Address of New Registered Agent:

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

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
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Title: () Change () Addition
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Title: () Change () Addition
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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 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

05/16/2007

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