


# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Apr 16, 2007 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # L04000049597</b>	
1. Entity Name <b>BEACHWALK VILLAGE, LLC</b>	

Principal Place of Business <b>4300 LEGENDARY DRIVE 204 DESTIN, FL 32541</b>	Mailing Address <b>4300 LEGENDARY DRIVE 204 DESTIN, FL 32541</b>
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01262007No Chg-LLC CR2E083 (11/05)

4. FEI Number <b>NOT APPLICABLE</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$5.00 Additional Fee Required</b>	

<b>6. Name and Address of Current Registered Agent</b>
<b>OLSON, RICHARD 4300 LEGENDARY DRIVE 204 DESTIN, FL 32541</b>

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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 reinstating)	DATE _____
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**Filing Fee is \$50.00  
Due by May 1, 2007**

U00000708800  
04/24/07-80130-009 50.00

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>MGRM OLSON &amp; ASSOCIATES OF NW FLORIDA, INC. 4300 LEGENDARY DRIVE STE. 204 DESTIN, FL 32541</b>
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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 prepare this report as required by Chapter 608, Florida Statutes.

<b>SIGNATURE:</b> 	<b>4607 850-650-2858</b>
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE	Date Daytime Phone #