

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000010831

FILED
Apr 13, 2004
Secretary of State

Entity Name: BEACHWALK PROPERTIES GROUP, LLC

Current Principal Place of Business:

15 PARADISE PLAZA
#3569
SARASOTA, FL 34239

New Principal Place of Business:

Current Mailing Address:

15 PARADISE PLAZA
#3569
SARASOTA, FL 34239

New Mailing Address:

FEI Number: 65-1121609

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WINSEY FREY, KIM
POINT OF ROCKS MANAGEMENT 7635
SARASOTA, FL 34240 US

Name and Address of New Registered Agent:

FREY, MARTIN
1921 WALDEMERE ST
SUITE 512
SARASOTA, FL 34239 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: MARTIN FREY

04/13/2004

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGR () Delete
Name: WIMSEY-FREY, KIM
Address: 7635 ALISTER MAKENZIE
City-St-Zip: SARASOTA, FL 34240

Title: MGR () Delete
Name: FREY, MARTIN
Address: 7635 ALISTER MAKENZIE
City-St-Zip: SARASOTA, FL 34240

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: K&M ENTERPRISES LLC,
Address: 15 PARADISE PLAZA #356
City-St-Zip: SARASOTA, FL 34239

Title: MGRM (X) Change () Addition
Name: FREY TRUST, MARTIN J
Address: 1921 WALDEMERE ST #512
City-St-Zip: SARASOTA, FL 34239

I hereby certify that the information supplied with this filing does not qualify for the 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 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: MARTIN FREY

MGRM

04/13/2004

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