

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000094828

**FILED**  
**Mar 30, 2010**  
**Secretary of State**

**Entity Name:** BEAR BROOK & BECKS CROSSINGS, LLC

**Current Principal Place of Business:**

815 MABBETTE ST.  
SUITE 202  
KISSIMMEE, FL 34741

**New Principal Place of Business:**

117B BROADWAY  
KISSIMMEE, FL 34741

**Current Mailing Address:**

815 MABBETTE ST.  
SUITE 202  
KISSIMMEE, FL 34741

**New Mailing Address:**

117B BROADWAY  
KISSIMMEE, FL 34741

**FEI Number:** 20-5614892

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

WOLFF, JEFFREY D  
815 MABBETTE ST.  
SUITE 202  
KISSIMMEE, FL 34741 US

**Name and Address of New Registered Agent:**

WOLFF, JEFFREY D  
815 MABBETTE ST.  
SUITE 108  
KISSIMMEE, FL 34741 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: JEFFREY D. WOLFF

03/30/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MR.  
Name: WOLFF, JEFFREY D  
Address: 815 MABBETTE ST., SUITE 108  
City-St-Zip: KISSIMMEE, FL 34741

Title: MR.  
Name: PARSONS, ZACHARY C  
Address: 117B BROADWAY  
City-St-Zip: KISSIMMEE, FL 34741

I hereby 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: JEFFREY D. WOLFF

PRES

03/30/2010

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