


**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 13, 2005 08:00 AM
Secretary of State

DOCUMENT # L00000002130 1. Entity Name BEECH FIDELITY TRUST, LLC	
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Principal Place of Business 2328 10TH AVENUE NORTH STE 403 LAKE WORTH, FL 33461-6606	Mailing Address 2328 10TH AVENUE NORTH STE 403 LAKE WORTH, FL 33461-6606
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04062005 No Chg-LLC

CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0990430	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent RUKIN, ROGER 2328 TENTH AVENUE NORTH, STE. 403 LAKE WORTH, FL 33461-6606	DO NOT WRITE IN THIS SPACE
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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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>	DATE _____

**Filing Fee is \$50.00
Due by May 1, 2005**

9. MANAGING MEMBERS/MANAGERS		DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM JAMES B RUKIN REVOCABLE TRUST 2328 10TH AVE. NORTH, SUITE 403 LAKE WORTH, FL 334616606	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM JULIA R RUKIN REVOCABLE TRUST 2328 10TH AVE, NORTH, SUITE 403 LAKE WORTH, FL 334616606	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR RUKIN, ROGER B 2328 10TH AVENUE NORTH STE 403 LAKE WORTH, FL 334616606	
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04/13/05-80086-003 50.00

11. I hereby certify that the information supplied with this filing does not qualify 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 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: <i>James B Rukin</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE</small>	Date _____	Daytime Phone # _____
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