

**2006 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Apr 10, 2006 08:00 AM**  
**Secretary of State**

DOCUMENT # L00000002130

1. Entity Name  
BEECH FIDELITY TRUST, LLC



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



03292006 No Chg-LLC

CR2E083 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
65-0990430

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$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**

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

Signature, typed or printed name of registered agent and fee if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$50.00  
Due by May 1, 2006**

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	JAMES B RUKIN REVOCABLE TRUST
STREET ADDRESS	2328 10TH AVE. NORTH, SUITE 403
CITY-STATE-ZIP	LAKE WORTH, FL 334616606
TITLE	MGRM
NAME	JULIA R RUKIN REVOCABLE TRUST
STREET ADDRESS	2328 10TH AVE. NORTH, SUITE 403
CITY-STATE-ZIP	LAKE WORTH, FL 334616606
TITLE	MGR
NAME	RUKIN, ROGER B
STREET ADDRESS	2328 10TH AVENUE NORTH STE 403
CITY-STATE-ZIP	LAKE WORTH, FL 334616606
TITLE	
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	

U000000500451  
04/25/06-80022-019 50.00

**DO NOT WRITE  
IN THIS SPACE**

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 execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

4/5/06

Date

Daytime Phone #