2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

Jun 27, 2005 8:00 am Secretary of State 06-02-2005 90520 007 ****50.00 **DOCUMENT # L00000004273** BEACH LAUNDRY, LLC Principal Place of Business Mailing Address **37 VIA DELUNA DRIVE** 37 VIA DELUNA DRIVE PENSACOLA BEACH, FL 32561 PENSACOLA BEACH, FL 32561 05242005 No Chg-LLC CR2E083 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3666483 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent **BOHANNON, TAMMY** DO NOT WRITE 37 VIA DELUNA DRIVE PENSACOLA BEACH, FL 32561 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 little if applicable. (NOTE: Registered Agent agneture required when reinstating) Filing Fee is \$50.00 Due by September 7, 2005 MANAGING MEMBERS/MANAGERS MGR TITLE BOHANNON, F. LEWIS NAME STREET ADDRESS P.O. BOX 1283 CITY-ST-ZIP GULF BREEZE, FL 32562 TITLE BOHANNON, TAMMY NAME STREET ADDRESS P.O. BOX 1283 CHY-ST-ZIP GULF BREEZE, FL 32562 TITLE NAME STREET ADDRESS DO NOT WRITE CITY_SI . ZIP. IN THIS SPACE NAME STREET ADDRESS

11. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I turther 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 of frustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP

CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE

LINE OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

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