

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000007678

Entity Name: BECKER/PSL, L.L.C.

FILED  
Apr 28, 2006  
Secretary of State

## Current Principal Place of Business:

917 CENTRAL PARKWAY  
STUART, FL 34994

## New Principal Place of Business:

3125 SW MAPP RD  
PALM CITY, FL 34990

## Current Mailing Address:

917 CENTRAL PARKWAY  
STUART, FL 34994

## New Mailing Address:

3125 SW MAPP RD  
PALM CITY, FL 34990

FEI Number: 65-1103470

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WEST, BRIAN  
325 SW MAPP ROAD  
PALM CITY, FL 39490 US

## Name and Address of New Registered Agent:

WEST, BRIAN  
3125 SW MAPP ROAD  
PALM CITY, FL 39490 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: BRIAN G WEST

04/28/2006

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete  
Name: PRINCE, JOEL L  
Address: 917 CENTRAL PARKWAY  
City-St-Zip: STUART, FL 34994

Title: MGRM (X) Delete  
Name: WEST, BRIAN  
Address: 3125 SW MAPP ROAD  
City-St-Zip: PALM CITY, FL 34990

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: WEST, BRIAN G  
Address: 3125 SW MAPP RD  
City-St-Zip: PALM CITY, FL 34990

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: BRIAN G WEST

M/M

04/28/2006

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