2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000008496

LAMBERT, JASON

ORLANDO, FL 32806 US

1501 E. GORE

Name:

Address:

City-St-Zip:

Entity Name: BEACON HILL GROUP, LLC

FILED Apr 30, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 1019 LANCASTER DRIVE ORLANDO, FL 32806 **Current Mailing Address: New Mailing Address:** 1019 LANCASTER DRIVE ORLANDO, FL 32806 FEI Number: 52-2320311 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: ANGELO, MARK R 1019 LANCASTER DRIVE ORLANDO, FL 32806 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: Electronic Signature of Registered Agent Date **MANAGING MEMBERS/MEMBERS: ADDITIONS/CHANGES:** MGRM () Change () Addition () Delete ANGELO, MARK R MGRM Name: Name: 1019 LANCASTER DRIVE Address: Address: City-St-Zip: ORLANDO, FL 32806 US City-St-Zip: Title: MGR () Delete Title: () Change () Addition Name: ULMER, TODD Name: Address: 1800 GARVIN STREET Address: City-St-Zip: ORLANDO, FL 32803 US City-St-Zip: Title: MGR () Delete Title: () Change () Addition ANDERSON, JASON Name: Name: Address: 2609 MADELINE AVE Address: City-St-Zip: WINTER PARK, FL 32789 US City-St-Zip: Title: MGR () Delete Title: () Change () Addition Name: DUDAK, AARON Name: 749 HEMPSTEAD Address: Address: City-St-Zip: ORLANDO, FL 32803 US City-St-Zip: Title: MGR () Delete Title: () Change () Addition

I hereby certify that the information supplied with this filing does not qualify for the 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 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.

Name:

Address:

City-St-Zip:

SIGNATURE: MARK R. ANGELO MGRM 04/30/2004