


**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jan 18, 2005 08:00 AM
Secretary of State

DOCUMENT # L02000006647 1. Entity Name BEAUMAR PROPERTIES, LLC	
--	---

Principal Place of Business 3351 MARINATOWN LANE STE 500 NORTH FORT MYERS, FL 33903	Mailing Address 3351 MARINATOWN LANE STE 500 NORTH FORT MYERS, FL 33903
---	---

DO NOT WRITE IN THIS SPACE



01142005No Chg-LLC

CR2E083 (10/03)

4. FEI Number 74-3082921	Applied For <input type="checkbox"/> Not Applicable
------------------------------------	--

5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$5.00 Additional Fee Required
--	---------------------------------------

6. Name and Address of Current Registered Agent PANSING, STEVEN L 3351 MARINATOWN LANE STE 500 NORTH FORT MYERS, FL 33903

**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 _____ <small>Signature, typed or printed name of registered agent and title if applicable</small>	(NOTE: Registered Agent signature required when reinstalling)	DATE _____
--	---	------------

Filing Fee is \$50.00 Due by May 1, 2005	U00000182231 01/18/05-80019-007 55.00
---	--

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P PANSING, STEVEN L 2506 SW 52ND STREET CAPE CORAL, FL 33914
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P TAYLOR, KEITH 1824 SE 20TH LANE CAPE CORAL, FL 33990
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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: <u>Steve Pansing</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE</small>	<u>1/14/05</u> <small>Date</small>	<u>239-955-6669</u> <small>Daytime Phone #</small>
---	---------------------------------------	---