

**2004 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED

Feb 27, 2004 08:00 AM
Secretary of State

DOCUMENT # L02000020614

1. Entity Name
THE BECNEL COMPANY, LC



Principal Place of Business
**15000 EMERALD COAST PARKWAY
DESTIN, FL 32541**

Mailing Address
**15000 EMERALD COAST PARKWAY
DESTIN, FL 32541**



01062004 No Chg-LLC

CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
55-0793021

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$5.00** Additional
Fee Required

6. Name and Address of Current Registered Agent

**NAPLES-LAWDOCK, INC.
4501 NORTH TAMiami TRAIL, SUITE 300
NAPLES, FL 34103**

**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 title if applicable.

(NOTE: Registered Agent signature required when retitling)

DATE

**Filing Fee is \$50.00
Due by May 1, 2004**

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**MGR
BECNEL, THOMAS R
15000 EMERALD COAST PARKWAY
DESTIN, FL 32541**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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100000068832
02/27/04-80059-005 50.00

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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)(b), 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

Thomas Becnel

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

Date

Daytime Phone #