2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 25, 2004 08:00 AM
Secretary of State

DOCUMENT # L02000025152

1. Entity Name
BEACHSIDE, LLC

Principal Place of Business
7563 PHILIPS HIGHWAY, SUITE 206
JACKSONVILLE, FL 32256

Mailing Address
114 32ND AVENUE SOUTH
JACKSONVILLE BEACH, FL 32250

05232004 No Chg-LLC CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
55-0803142
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

GRABLE, STEPHEN E
114 32ND AVENUE SOUTH
JACKSONVILLE, FL 32250

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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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee Is $50.00
Due by September 8, 2004

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	BEACHSIDE FAMILY LIMITED PARNTERSHIP
STREET ADDRESS	114 32ND AVENUE SOUTH
CITY-ST-ZIP	JACKSONVILLE, FL 32250
TITLE	
NAME	
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CITY-ST-ZIP	

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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: SEGrable Stephen E. Grable 5/21/04 904-296-9355
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #