

**LIMITED LIABILITY COMPANY
UNIFORM BUSINESS REPORT (UBR)**

FILED
Jul 14, 2005 8:00 am
Secretary of State

07-14-2005 90018 028 ****50.00

DOCUMENT # **L03000015032**

1. Entity Name
BEECHWOOD STUDIO LLC



DO NOT WRITE IN THIS SPACE

20063466

2. Principal Place of Business
5260 S. MAC DILL AVE

Suite, Apt. #, etc. **1**

3. Mailing Address
5260 S. MAC DILL AVE

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
TAMPA FLORIDA

City & State
TAMPA FLORIDA

4. FEI Number
8610 58670

Applied For
Not Applicable

Zip
33611

Country
USA

Zip
33611

Country
USA

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

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name **ROBERT CRUM**

Street Address (P.O. Box Number is Not Acceptable)

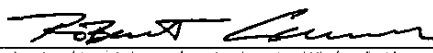
5260 S MAC DILL AVE

City **TAMPA**

FL

Zip Code
33611

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.

6.10.05

DATE

FEE IS \$50.00
Make Check Payable to Florida Department of State
DUE BY MAY 1

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

MGR. ROBERT CRUM
5260 S MAC DILL AVE
TAMPA FL. 33611

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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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)(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: 

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

6.10.05

Date

813.839.3719

Daytime Phone #

CR2E083B (12/02)