

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
May 01, 2006 08:00 AM
Secretary of State

DOCUMENT # L03000018494 1. Entity Name BEAVER BUSINESS DEVELOPMENT, LLC	
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Principal Place of Business 1741 WEST BEAVER STREET JACKSONVILLE, FL 32209	Mailing Address P.O. BOX 41430 JACKSONVILLE, FL 32203-1430
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01172006No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 05-0570319	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$5.00 Additional Fees Required

6. Name and Address of Current Registered Agent FRISCH, HANS 1741 W BEAVER STREET JACKSONVILLE, FL 32209
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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.

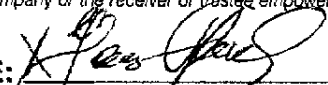
SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

**Filing Fee is \$50.00
Due by May 1, 2006**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM FRISCH, HANS 1741 W. BEAVER STREET JACKSONVILLE, FL 32209
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U00000547438 05/12/06-80025-011 50.00 DO NOT WRITE IN THIS SPACE

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:  **HANS FRISCH** **4/25/06** **354-853**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #