

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000039447

Entity Name: 722 BEACON, LLC

FILED
Feb 12, 2008
Secretary of State

Current Principal Place of Business:

101 E. KENNEDY BLVD., STE. 3020
TAMPA, FL 336025150

New Principal Place of Business:

Current Mailing Address:

101 E. KENNEDY BLVD., STE. 3020
TAMPA, FL 336025150

New Mailing Address:

FEI Number: 20-0467590

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LYNN, ELISE B
8718 THORNWOOD LANE
TAMPA, FL 33615 US

Name and Address of New Registered Agent:

CHECHELE, SAMANTHA
ATTORNEY AND COUNSELOR AT LAW
5625 CENTRAL AVENUE
ST. PETERSBURG, FL 33710 US

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.

SIGNATURE: SAMANTHA CHECHELE

02/12/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: LAROCCA, JOHN N
Address: 3314 BARCELONA ST.
City-St-Zip: TAMPA, FL 33629

Title: MGR () Delete
Name: MURPHY, ALLEN S
Address: 3209 SAN JOSE STREET
City-St-Zip: TAMPA, FL 33629

Title: MGR () Delete
Name: BATSEL LYNN, ELISE
Address: 8718 THORNWOOD LANE
City-St-Zip: TAMPA, FL 33615

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: ALLEN S MURPHY

MGR

02/12/2008

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date