

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000041517

FILED
Apr 26, 2005
Secretary of State

Entity Name: FRIENDS BEACH PROPERTIES LLC

Current Principal Place of Business:

2235 BREAKS LN
CHULUOTA, FL 32766

New Principal Place of Business:

Current Mailing Address:

2235 BREAKS LN
CHULUOTA, FL 32766

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PECYLAK, KATHRYN M
2825 LEXINGTON CT.
OVIEDO, FL 327658448 US

Name and Address of New Registered Agent:

PECYLAK, KATHRYN M
2235 BREAKS LANE
CHULUOTA, FL 32766 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:

04/26/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: COSTANZO, NORMA
Address: 3000 SPRING CREEK COURT
City-St-Zip: HIGHLAND VILLAGE, TX 75077

Title: MGRM () Delete
Name: COSTANZO, RONALD
Address: 3000 SPRING CREEK COURT
City-St-Zip: HIGHLAND VILLAGE, TX 75077

Title: MGRM () Delete
Name: PECYLAK, KATHRYN
Address: 2825 LEXINGTON CT.
City-St-Zip: OVIEDO, FL 327658448

Title: MGRM () Delete
Name: PECYLAK, STEPHEN
Address: 2825 LEXINGTON CT.
City-St-Zip: OVIEDO, FL 327658448

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: COSTANZO, NORMA
Address: 736 GREY HERON PLACE
City-St-Zip: CHULUOTA, FL 32766 US

Title: MGRM (X) Change () Addition
Name: COSTANZO, RONALD
Address: 736 GREY HERON PLACE
City-St-Zip: CHULUOTA, FL 32766 US

Title: MGRM (X) Change () Addition
Name: PECYLAK, KATHRYN
Address: 2235 BREAKS LANE
City-St-Zip: CHULUOTA, FL 32766 US

Title: MGRM (X) Change () Addition
Name: PECYLAK, STEPHEN
Address: 2235 BREAKS LANE
City-St-Zip: CHULUOTA, FL 32766 US

I hereby certify that the information supplied with this filing does not qualify for the 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 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: KATHRYN PECYLAK

MGRM

04/26/2005

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