

# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Apr 20, 2004**  
**Secretary of State**

DOCUMENT# L03000041929

**Entity Name:** BEACH LIVING, L.L.C.

**Current Principal Place of Business:**

**New Principal Place of Business:**

406 N. OCEANWALK DRIVE  
ATLANTIC BEACH, FL 32233

**Current Mailing Address:**

**New Mailing Address:**

406 N. OCEANWALK DRIVE  
ATLANTIC BEACH, FL 32233

**FEI Number:**  **FEI Number Applied For (X)**  **FEI Number Not Applicable ( )**  **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

**Name and Address of New Registered Agent:**

BROAD AND CASSAL  
ATTN; KAREN STETSON, ESQ.  
MIAMI CTR., STE 3000, 201 S BISCAYNE BLVD.  
MIAMI, FL 33131 US

WILLIAM J. MANGINE III, EA  
320 OSCEOLA AVENUE  
JACKSONVILLE BEACH,  
FLORIDA, FL 32250 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:** WILLIAM J. MANGINE III 04/20/2004  
Electronic Signature of Registered Agent Date

**MANAGING MEMBERS/MEMBERS:**

**ADDITIONS/CHANGES:**

**Title:** ( ) Delete  
**Name:**  
**Address:**  
**City-St-Zip:**

**Title:** MGR ( ) Change (X) Addition  
**Name:** ABAD, ROSEMARIE P MGR  
**Address:** 406 OCEANWALK DRIVE N  
**City-St-Zip:** ATLANTIC BEACH, FL 32233

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:** ROSAMARIE P ABAD MGR 04/20/2004  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date