

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L04000035403

1. Entity Name
AVILA BEECHER, LLC



Principal Place of Business
3400 S. TAMiami TRAIL
SUITE 202
SARASOTA, FL 34239

Mailing Address
3400 S. TAMiami TRAIL
SUITE 202
SARASOTA, FL 34239

2. Principal Place of Business

4938 Sabal Lake Cir.
Suite, Apt. #, etc.

3. Mailing Address

4938 Sabal Lake Cir.
Suite, Apt. #, etc.

City & State
Sarasota, FL

City & State
Sarasota, FL

4. FEI Number

☒ Applied For
☐ Not Applicable

Zip
34238

Country
Sarasota

Zip
34238

Country
Sarasota

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

6. Name and Address of Current Registered Agent

LUZIER, THOMAS B ESQ.
3400 S. TAMiami TRAIL
SUITE 202
SARASOTA, FL 34239

7. Name and Address of New Registered Agent

Name
Brian Beecher

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

4938 Sabal Lake Cir.

City
Sarasota

FL

Zip Code
34238

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)

8-19-05

DATE

Filing Fee is \$50.00
Due by September 7, 2005

Make check payable to:
Florida Department of State

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Member Managing Member ☐ Delete
Brian Beecher
4938 Sabal Lake Cir.
Sarasota, FL 34238

10. ADDITIONS/CHANGES

☐ Change ☐ Addition
700058965537
08/25/05--01038--010 **75.00

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
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☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

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:

Brian Beecher

8-19-05

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

Date

Daytime Phone #