

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Feb 12, 2007 8:00 am**  
**Secretary of State**

02-12-2007 90311 030 \*\*\*\*50.00

DOCUMENT # L04000041280

1. Entity Name  
BEACH CATCHERS, LLC



Principal Place of Business  
2865 NE 35TH COURT  
FORT LAUDERDALE, FL 33308 US

Mailing Address  
2865 NE 35TH COURT  
FORT LAUDERDALE, FL 33308 US

2. Principal Place of Business - No P.O. Box #  
1717 S. OCEAN Blvd

Suite, Apt. #, etc.  
#5

3. Mailing Address  
1717 S. OCEAN Blvd

Suite, Apt. #, etc.  
#5

City & State  
POMPANO BEACH, FL

Zip  
33062

Country  
US

City & State  
POMPANO BEACH, FL

Zip  
33062

Country  
US



02092007 Chg-LLC CR2E083 (12/06)

4. FEI Number  
20-1191929

Applied For  
Not Applicable

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

## 6. Name and Address of Current Registered Agent

MALMAN, MYLES ESQ.  
3230 STERLING ROAD  
HOLLYWOOD, FL 33020

## 7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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, 2007**

**Make check payable to  
Florida Department of State**

## 9. MANAGING MEMBERS/MANAGERS

TITLE MGRM ☐ Delete  
NAME TISCHLER, SUSAN B  
STREET ADDRESS 1717 SOUTH OCEAN BLVD., #5  
CITY-ST-ZIP POMPANO BEACH, FL 33062

TITLE MGRM ☐ Delete  
NAME TOAL, PAMELA C  
STREET ADDRESS 2036 INTRACOASTAL DRIVE  
CITY-ST-ZIP FORT LAUDERDALE, FL 33305

TITLE MGRM ☐ Delete  
NAME SHELDON, AMY  
STREET ADDRESS 404 EAST 55TH STREET, APT. 11E  
CITY-ST-ZIP NEW YORK, NY 10022

TITLE MGRM ☒ Delete  
NAME CASH, PEGGY S  
STREET ADDRESS 2865 NE 35TH COURT  
CITY-ST-ZIP FORT LAUDERDALE, FL 33308

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

## 10. ADDITIONS/CHANGES

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

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

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

TITLE MGRM ☐ Change ☒ Addition  
NAME CASH, Thomas V.  
STREET ADDRESS 2865 N.E. 35th Court  
CITY-ST-ZIP Fort Lauderdale, FL 33308

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

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

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:

*Susan B Tischler*

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

2/9/07

Date

954-675-0112

Daytime Phone #