

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000046893

Entity Name: REMAN-BEACHES, LLC

FILED  
Apr 28, 2009  
Secretary of State

**Current Principal Place of Business:**

4131 UNIVERSITY BOULEVARD SOUTH  
#8  
JACKSONVILLE, FL 32216

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 55115  
JACKSONVILLE, FL 32216

**New Mailing Address:**

FEI Number: 14-1906642

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

THE FARAH LAW FIRM, P.A.  
3060 MERCURY ROAD  
101  
JACKSONVILLE, FL 32207 US

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

THE FARAH LAW FIRM, P.A.  
1506 PRUDENTIAL DRIVE  
SECOND FLOOR  
JACKSONVILLE, FL 32207 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: \_\_\_\_\_

Electronic Signature of Registered Agent

04/28/2009

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: REMAN, LLC  
Address: P.O. BOX 55115  
City-St-Zip: JACKSONVILLE, FL 32216

**ADDITIONS/CHANGES:**

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: ELIAS N. SAIKALI FOR REMAN, LLC

MGRM

04/28/2009

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