

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000081847

FILED
Mar 15, 2006
Secretary of State

Entity Name: BEACH ROAD BUSINESS CENTER LLC

Current Principal Place of Business:

4397 N .STATE RD. 7
LAUDERDALE LAKES, FL 33319

New Principal Place of Business:

Current Mailing Address:

4397 N .STATE RD. 7
LAUDERDALE LAKES, FL 33319

New Mailing Address:

4901 UMBRELLA TREE LANE
TAMARAC, FL 33319

FEI Number: 34-2026880

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EARLE, STAFFORD
4397 N. STATE RD. 7
LAUDERDALE LAKES, FL 33319 US

Name and Address of New Registered Agent:

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

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: EARLE, STAFFORD
Address: 4397 N. STATE RD. 7
City-St-Zip: LAUDERDALE LAKES, FL 33319

Title: MGR () Delete
Name: EARLE, LISA
Address: 4901 UMBRELLA TREE LANE
City-St-Zip: TAMARAC, FL 33319

Title: MGR () Delete
Name: EARLE, SIMONE
Address: 4901 UMBRELLA TREE LANE
City-St-Zip: TAMARAC, FL 33319

Title: MGR () Delete
Name: EARLE, STEPHEN
Address: 4901 UMBRELLA TREE LN.
City-St-Zip: TAMARAC, FL 33319

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: EARLE, STAFFORD
Address: 4901 UMBRELLA TREE LANE
City-St-Zip: TAMARAC, FL 33319

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGR (X) Change () Addition
Name: EARLE, LISA
Address: 4901 UMBRELLA TREE LN.
City-St-Zip: TAMARAC, FL 33319

I hereby certify that the information supplied with this filing does not qualify for the 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: STAFFORD EARLE

MGRM

03/15/2006

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