

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000032716

Entity Name: C/BEACON COUNTYLINE, LLC

FILED
Apr 28, 2006
Secretary of State

Current Principal Place of Business:

355 ALHAMBRA CIRCLE, SUITE 900
CORAL GABLES, FL 33134

New Principal Place of Business:

Current Mailing Address:

355 ALHAMBRA CIRCLE, SUITE 900
CORAL GABLES, FL 33134

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COBB, KOLLEEN
355 ALHAMBRA CIRCLE, SUITE 900
C/O CODINA GROUP
CORAL GABLES, FL 33134 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: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGR () Change (X) Addition
Name: CODINA HOLDINGS III., LTD.
Address: 355 ALHAMBRA CIRCLE, SUITE 900
City-St-Zip: CORAL GABLES, FL 33134

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: KOLLEEN OP COBB

VP

04/28/2006

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