

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000037239

FILED  
Feb 28, 2007  
Secretary of State

Entity Name: CARRINGTON BEACH PROPERTIES, LLC

**Current Principal Place of Business:**

THE KRESS BUILDING, SUITE 202  
475 CENTRAL AVENUE  
ST. PETERSBURG, FL 33701 US

**New Principal Place of Business:**

**Current Mailing Address:**

THE KRESS BUILDING, SUITE 202  
475 CENTRAL AVENUE  
ST. PETERSBURG, FL 33701 US

**New Mailing Address:**

FEI Number: 20-2717012      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

MASCARA, ERNEST L  
THE KRESS BUILDING, SUITE 202  
475 CENTRAL AVENUE  
ST. PETERSBURG, FL 33701 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: CARRINGTON, PATRICIA H  
Address: 475 CENTRAL AVE, SUITE 202  
City-St-Zip: ST PETERSBURG, FL 33701 US

Title: MGRM ( ) Delete  
Name: CARRINGTON, EUGENE  
Address: 475 CENTRAL AVE, SUITE 202  
City-St-Zip: ST PETERSBURG, FL 33701 US

Title: MGRM ( ) Delete  
Name: CARRINGTON, JEFFREY E  
Address: 475 CENTRAL AVE, SUITE 202  
City-St-Zip: ST PETERSBURG, FL 33701 US

Title: MGRM ( ) Delete  
Name: CARRINGTON, MARK D  
Address: 475 CENTRAL AVENUE, SUITE 202  
City-St-Zip: ST. PETERSBURG, FL 33701 US

**ADDITIONS/CHANGES:**

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

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

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

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

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: PATRICIA H. CARRINGTON

MGRM

02/28/2007

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