2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT #1.05000066378

FILED May 03, 2006 8:00 am Secretary of State 04-17-2006 90039 039 ****50.00

1. Enity Name BEATRICE PLACE CONDOMINIUMS, LLC						04-17-200	0 90039 ()39	730.00	
Principal Place of Business 2130 DOVEFIELD DRIVE PENSACOLA, FL 32534			Malling Address 2130 DOVEFIELD DRIVE PENSACOLA, FL 32534			30006912				
2. Principal Place of Business		3. Mailing Address								
Suite, Apt. #, etc.		Suite, Apt. #, etc.			04122006	Chg-LLC	CR2E083	(11/05)		
City & State		City & State			4. FEI Number	192336	1		plied For at Applicable	
Zip Country		Žip Country		try	5. Certilicate	of Status Desired		.00 Add Required		
6. Name and Address of Current Registered Agent					Name	7. Name and	Address of New Re	gistered Age	nt	
PATTEN, WALTER E 2130 DOVERFIELD DRIVE						(P.O. Box Number is Not Acceptable)				
PENSACOLA, FL 32534										
			City					FL	Zip Code	e
		ily submits this statement for stered agent.	the purpose of changing its	register	ed office or registe	red agent, or bot	th, in the State of Flor	ida. Lam fami	itiar with,	and accept
SIGNATURE .	Signature, typed	d or printed name of registered agent at	nd title if applicable. (NOTE	. Registere	d Agers algorithme requires	d when rehalating)	· · · · ·	DATE		
Filing Fee is \$50.00 Due by May 1, 2006							Make check payable to Florida Department of State			
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Fi Di	ling Fee ue by Ma	is \$50.00 by 1, 2006 MANAGING MEMBER	RS/MANAGERS	10.				Department		
Di	MGRM	ny 1, 200 6 	RS/MANAGERS	10. III L	l l		Florida	Department CHANGES		Addition
9.	MGRM PATTEN, 2130 DO	MANAGING MEMBER		NAM SIRE	l l		Florida	Department CHANGES	of State	
9. THE NAME STREET ADDRESS CITY-ST-ZIP	MGRM PATTEN, 2130 DO	MANAGING MEMBER WALTER E VEFIELD DRIVE		NAM SIRE	E EET ADDRESS -ST-ZIP E		Florida	Department CHANGES	of State	
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Indepty certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Following a statutes. In the receiver and that my signature shall have the same legal effect as if made under path; 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.