

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000087076

Entity Name: BEACHLIFE GROUP, LLC

FILED
Jan 24, 2012
Secretary of State

Current Principal Place of Business:

956 HOLLY CIRCLE
ORMOND BEACH, FL 32176 US

New Principal Place of Business:

Current Mailing Address:

956 HOLLY CIRCLE
ORMOND BEACH, FL 32176 US

New Mailing Address:

FEI Number: 20-3386310

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WOODEN, JOE SR.
956 HOLLY CIRCLE
ORMOND BEACH, FL 32176 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: MGR
Name: WOODEN, JOE M
Address: 956 HOLLY CIRCLE
City-St-Zip: ORMOND BEACH, FL 32176 US

Title: MGR
Name: WOODEN, MYRA B
Address: 956 HOLY CIRCLE
City-St-Zip: ORMOND BEACH, FL 32176 US

Title: MGR
Name: WOODEN, DONALD GIL
Address: 96 SUNDANCE TRAIL
City-St-Zip: ORMOND BEACH, FL 32176

Title: MGR
Name: PHILP, STEPHEN
Address: 3111 BAYSHORE BLVD.
City-St-Zip: NE ST. PETERSBURG, FL

Title: MGR
Name: PHILP, DONNA
Address: 3111 BAYSHORE BLVD.
City-St-Zip: NE ST. PETERSBURG, FL

I hereby 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: JOE M. WOODEN

MGR

01/24/2012

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