2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L05000088068

1. Entity Name BEE WOOD WORKS, LLC



FILED Mar 12, 2008 08:00 A Secretary of State

Principal Place of Business 5560 65TH STREET VERO BEACH, FL 32967 Mailing Address

5560 65TH STREET VERO BEACH, FL 32967



01282008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number NOT APPLICABLE Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

ROBERTS, PETER 5560 65TH STREET VERO BEACH, FL 32967

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The above named entity		statement for	the purpose of c	hanging its registe	red office or regi	stered agent, or b	ooth, in the State	of Florida. I	am familiar with,	and accept
the obligations of registe	red agent.									
		,								

SIGNATURE.

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75

9.	MANAGING MEMBERS/MANAGERS						
TITLE	MGRM						
NAME	ROBERTS, PETER M						
STREET ADDRESS	5560 65TH ST						
CHY-SI-ZIP	VERO BEACH, FL 32967						
TITLE							
NAME							
STREET ADDRESS							
CITY-S1-ZIP							
TITLE							
NAME							
STREET ADDRESS							
CITY-ST-ZIP							
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CITY-ST-ZIP .	<u> </u>						
TITLE,							
NAME							
STREET ADDRESS							
CITY-ST-ZIP							
11. I hereby certify that the information supplied with this fillion does not qualify for the or							

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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119. Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

2.25.2008

172.794.7549

Daytime Phone #