

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000106062

FILED  
Mar 17, 2009  
Secretary of State

Entity Name: BEC BUILDING, LLC

**Current Principal Place of Business:**

445 WEST DRIVE  
SUITE 104  
MELBOURNE, FL 32904

**New Principal Place of Business:**

**Current Mailing Address:**

445 WEST DRIVE  
SUITE 104  
MELBOURNE, FL 32904

**New Mailing Address:**

FEI Number: 20-3708288

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

VENTURE MANAGEMENT GROUP, INC.  
445 WEST DRIVE  
SUITE 103  
MELBOURNE, FL 32904 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: HAUSER, H W  
Address: 10601 CHARLESTON DR.  
City-St-Zip: VERO BEACH, FL 32963

Title: MGRM ( ) Delete  
Name: OSTERHOUT, ALFRED B  
Address: 3332 CAT BRIER TRAIL  
City-St-Zip: HARMONY, FL 34773

Title: MGRM (X) Delete  
Name: SMITH, MITCHELL L  
Address: 6385 SOUTH US 1  
City-St-Zip: ROCKLEDGE, FL 32955

**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:

I hereby certify that the information supplied with this filing does not qualify 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: KIMBERLY BROWN

CFO

03/17/2009

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