## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L05000111047

Entity Name: BEISBOL DEL SUR, LLC

City-St-Zip:

TAMPA, FL 33614

FILED Apr 28, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 1 STEINBRENNER DRIVE TAMPA, FL 33614 **Current Mailing Address: New Mailing Address:** 1 STEINBRENNER DRIVE TAMPA, FL 33614 FEI Number: 20-3809348 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BUSH ROSS REGISTERED AGENT SERVICES, LLC 1801 NORTH HIGHLAND AVENUE TAMPA, FL 33602 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: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete STEINBRENNER, HAROLD Z Name: Name: Address: ONE STEINBRENNER DRIVE Address: City-St-Zip: TAMPA, FL 33614 City-St-Zip: Title: MGR () Delete Title: () Change () Addition Name: LOPEZ, FELIX Name: Address: ONE STEINBRENNER DRIVE Address: City-St-Zip: TAMPA, FL 33614 City-St-Zip: Title: MGR () Delete Title: () Change () Addition TROST, LONN Name: Name: ONE STEINBRENNER DRIVE Address: Address: City-St-Zip: TAMPA, FL 33614 City-St-Zip: Title: MGR ( ) Delete Title: () Change () Addition Name: BRUNO, ANTHONY Name: ONE STEINBRENNER DRIVE Address: Address: City-St-Zip: TAMPA, FL 33614 City-St-Zip: Title: Title: MGR ( ) Delete () Change () Addition STALLINGS, NORMAN JR Name: Name: ONE STEINBRENNER DRIVE Address: Address:

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.

City-St-Zip:

SIGNATURE: FELIX LOPEZ MGR 04/28/2009