


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 18, 2008 08:00 AM
Secretary of State

DOCUMENT # L06000007650	
1. Entity Name BEL-AIRE SB, LLC	

Principal Place of Business C/O RICHARD S. WEBB, IV, ESQ. 2033 MAIN STREET, SUITE 600 SARASOTA, FL 34237	Mailing Address C/O RICHARD S. WEBB, IV, ESQ. 2033 MAIN STREET, SUITE 600 SARASOTA, FL 34237
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DO NOT WRITE IN THIS SPACE



01152008No Chg-LLC CR2E083 (12/07)

4. FEI Number NOT APPLICABLE	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent WEBB, RICHARD S IV 2033 MAIN STREET, SUITE 600 SARASOTA, FL 34237
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8. 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. I am familiar with, and accept the obligations of registered agent.


SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>	DATE _____
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FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75	U00000788704 01/18/08-80054-002 138.75
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9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P TYLER, LANNY W P.O. BOX 3265 SARASOTA, FL 34230
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TR WEBB, RICHARD S IV 2033 MAIN ST #600 SARASOTA, FL 34237
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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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	1/15/08 (541) 366-8100 Date Daytime Phone #
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