

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Aug 07, 2008 8:00 am
Secretary of State

08-07-2008 90009 050 ***138.75

DOCUMENT # L06000083649 1. Entity Name BENNETT FAMILY BEACH HOUSE, LLC			
Principal Place of Business 2822 S FLETCHER AVE JACKSONVILLE, FL 32203		Mailing Address WALLACE W. BENNETT Wallace M. Bennett JACKSONVILLE, FL 32210	
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.		3. Mailing Address 5031 Ortega Forest Dr Suite, Apt. #, etc.	
City & State Fernandina Beach, FL Zip 32034 Country		City & State Jacksonville, FL Zip 32210 Country	
6. Name and Address of Current Registered Agent BENNETT, WALLACE M 5031 ORTEGA FOREST DRIVE JACKSONVILLE, FL 32210		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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 _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>			
FILE NOW!!! FEE IS \$538.75 Due by September 12, 2008		D.I.D NOT receive Prior Notification	
Make check payable to Florida Department of State			
9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM BENNETT, RUTH H 5031 ORTEGA FOREST DRIVE JACKSONVILLE, FL 32210	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM Maddox, Bonnie B 2466 Hawthorne Drive Montgomery, AL 36111
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM BENNETT, FAMILY 5031 ORTEGA FOREST DRIVE JACKSONVILLE, FL 32210	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM Poore, Susan B. 4203 Rapallo Rd Jacksonville, FL 32244
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM BENNETT, JR, Wallace M. 12904 Catalina Leeswood, KS 66209	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM Genard, Mary Anna B 219 St. Augustine Drive Greenwood, SC 29649
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM BENNETT, JR, Wallace M. 12904 Catalina Leeswood, KS 66209	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM Genard, Mary Anna B 219 St. Augustine Drive Greenwood, SC 29649
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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: <u>Wallace M. Bennett</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small>		Date: <u>7/28/08</u> (904) 389-4553 <small>Daytime Phone #</small>	