

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000019820

**FILED**  
**Mar 31, 2008**  
**Secretary of State**

**Entity Name:** BEACHLIFELAW LLC

**Current Principal Place of Business:**

1619 HOPKINS CREEK LANE  
NEPTUNE BEACH, FL 32266

**New Principal Place of Business:**

1825-B 3RD ST. N.  
JACKSONVILLE BEACH, FL 32250 US

**Current Mailing Address:**

1619 HOPKINS CREEK LANE  
NEPTUNE BEACH, FL 32266

**New Mailing Address:**

PO BOX 49220  
JACKSONVILLE BEACH, FL 32240 US

FEI Number: 26-1280555

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

GALLAGHER, VINCENT PAUL  
1619 HOPKINS CREEK LANE  
NEPTUNE BEACH, FL 32266 US

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

GALLAGHER, VINCENT P ESQ  
1619 HOPKINS CREEK LANE  
NEPTUNE BEACH, FL 32266 US

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: VINCENT PAUL GALLAGHER

03/31/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: GALLAGHER, VINCENT PAUL  
Address: 1619 HOPKINS CREEK LANE  
City-St-Zip: NEPTUNE BEACH, FL 32266

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: GALLAGHER, VINCENT P ESQ  
Address: 1619 HOPKINS CREEK LANE  
City-St-Zip: NEPTUNE BEACH, FL 32266

Title: MGR ( ) Change (X) Addition  
Name: GALLAGHER, HOLLY G ADMIN  
Address: 1619 HOPKINS CREEK LANE  
City-St-Zip: NEPTUNE BEACH, FL 32266 US

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: HOLLY GORDON GALLAGHER

MGR

03/31/2008

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