2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000036841

Entity Name: BEBACK ENTERPRISES, LLC

FILED May 14, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 4430 MCASHTON DRIVE 4430 MCASHTON STREET SARASOTA, FL 34233 SARASOTA, FL 34233 **Current Mailing Address: New Mailing Address:** 4608 ASHTON ROAD 4430 MCASHTON STREET SARASOTA, FL 34233 US SARASOTA, FL 34233 US FEI Number: 20-8807083 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SAMS, LAURIE B ESQ ACKERLAND, CAROLYN M 2815 PROCTOR ROAD 4430 MCASHTON STREET SARASOTA, FL 34231 US SARASOTA, FL 34233 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: CAROLYN ACKERLAND 05/14/2008 Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGRM Title: () Delete (X) Change () Addition ACKERLAND, CAROLYN ACKERLAND, CAROLYN M Name: Name: 4463 DON MEYER DRIVE Address: 4463 DON MEYER DRIVE Address: City-St-Zip: SARASOTA, FL 34233 US City-St-Zip: SARASOTA, FL 34233 US Title: Title: () Change (X) Addition () Delete Name: Name: ACKERLAND, TIMOTHY H Address: Address: 4463 DON MEYER DRIVE City-St-Zip: City-St-Zip: SARASOTA, FL 34233 US Title: () Delete Title: MGR () Change (X) Addition ACKERLAND, SUZAN K Name: Name: 4687 OAK FOREST DRIVE EAST Address: Address: City-St-Zip: City-St-Zip: SARASOTA, FL 34231 US Title: () Delete Title: MGR () Change (X) Addition Name: Name: BEBBER, STEVE Address: Address: 4250 BELL AVENUE City-St-Zip: City-St-Zip: SARASOTA, FL 34231 US Title: () Delete Title: () Change (X) Addition BEBBER, DARCY Name: Name: 4250 BELL AVENUE Address: Address: City-St-Zip: City-St-Zip: SARASOTA, FL 34231 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: CAROLYN ACKERLAND MGRM 05/14/2008