

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000069089

FILED
Apr 22, 2009
Secretary of State

Entity Name: BEV PAQ, LLC

Current Principal Place of Business:

1610 NORTHGATE BOULEVARD
SARASOTA, FL 34234

New Principal Place of Business:

Current Mailing Address:

1610 NORTHGATE BOULEVARD
SARASOTA, FL 34234

New Mailing Address:

FEI Number: 26-1519671

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NAJMY, JOSEPH L ESQ.
PORGES, HAMLIN, KNOWLES, PROUTY
1205 MANATEE AVENUE WEST
BRADENTON, FL 34205 US

Name and Address of New Registered Agent:

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:

Title: CEO () Delete
Name: MURRAY, CHARLES R
Address: 1610 NORTHGATE BLVD
City-St-Zip: SARASOTA, FL 34234

Title: P () Delete
Name: MURRAY, STUART C
Address: 1610 NORTHGATE BLVD
City-St-Zip: SARASOTA, FL 34234

Title: VPST () Delete
Name: MURRAY, YVONNE E
Address: 1610 NORTHGATE BLVD
City-St-Zip: SARASOTA, FL 34234

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: STUART C MURRAY

P

04/22/2009

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