

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jun 13, 2008 8:00 am
Secretary of State

04-28-2008 90038 017 ***138.75

DOCUMENT # L07000079415 1. Entity Name BEACH CLUB PENTHOUSE, LLC					
Principal Place of Business 21 LA CARIBE DR PENSACOLA BEACH, FL 32561			Mailing Address 21 LA CARIBE DR PENSACOLA BEACH, FL 32561		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 26-0654532	
5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required				Applied For Not Applicable	
6. Name and Address of Current Registered Agent BEGGS & LANE, A REGISTERED LIMITED LIABILITY PARTNERSHIP 501 COMMENDENCIA ST PENSACOLA, FL 32502			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 _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reestablishing)					
FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$638.75			Make check payable to Florida Department of State		
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM Robert Rinke 21 La Caribe Dr. Pensacola Beach, FL 32561	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Abby Rinke 21 La Caribe Dr. Pensacola Beach, FL 32561	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete				
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete				
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 606, Florida Statutes.					
SIGNATURE: <u><i>Robert Rinke</i></u> 4-24-08 850-934-1295 SIGNATURE AND TYPED OR PRINTED NAME OF MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #					

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