

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000014307

**FILED**  
**Feb 20, 2010**  
**Secretary of State**

**Entity Name:** BEACH ESCAPE, LLC

**Current Principal Place of Business:**

2515 S. ATLANTIC AVE.  
306  
DAYTONA BEACH SHORES, FL 32118

**New Principal Place of Business:**

**Current Mailing Address:**

268 ADELAIDE ST.  
DEBARY, FL 32713

**New Mailing Address:**

**FEI Number:** 26-4300367

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

LOBASSO, THOMAS  
268 ADELAIDE ST.  
DEBARY, FL 32713 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:** MGRM  
**Name:** LOBASSO, KAREN C  
**Address:** 268 ADELAIDE ST.  
**City-St-Zip:** DEBARY, FL 32713

**Title:** MGRM  
**Name:** PAUL, CHRIS G  
**Address:** 347 BROOKHAVEN PLACE  
**City-St-Zip:** LAKE MARY, FL 32746

**Title:** MGRM  
**Name:** LOBASSO, THOMAS  
**Address:** 268 ADELAIDE ST  
**City-St-Zip:** DEBARY, FL 32713

**Title:** MGRM  
**Name:** PAUL, GAYLE M  
**Address:** 347 BROOKHAVEN PLACE  
**City-St-Zip:** LAKE MARY, FL 32746

I hereby 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:** KAREN LOBASSO

MGRM

02/20/2010

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