

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000104585

**FILED**  
**Feb 07, 2012**  
**Secretary of State**

**Entity Name:** BEAVERS SOUTHEAST LLC

**Current Principal Place of Business:**

50 BEAL PARKWAY, SW,  
SUITE 8  
FT. WALTON BEACH, FL 32548

**New Principal Place of Business:**

50 BEAL PARKWAY SW  
SUITE 8  
FT. WALTON BEACH, FL 32548

**Current Mailing Address:**

50 BEAL PARKWAY, SW,  
SUITE 8  
FT. WALTON BEACH, FL 32548

**New Mailing Address:**

50 BEAL PARKWAY SW  
SUITE 8  
FT. WALTON BEACH, FL 32548

**FEI Number:** 27-3621251

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

RICHARD S. JOHNSON P.A.  
107 N. PARTIN DRIVE  
NICEVILLE, FL 32578 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: MGR  
Name: JIMMIE, BEAVERS  
Address: 50 BEAL PARKWAY, SW SUITE 8  
City-St-Zip: FT. WALTON BEACH, FL 32548

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: JIMMIE BEAVERS

MGR

02/07/2012

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