

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000142743

**FILED**  
**Apr 12, 2012**  
**Secretary of State**

**Entity Name:** SRBEACH, LLC

**Current Principal Place of Business:**

14825 FRONT BEACH ROAD, UNIT 1704  
PANAMA CITY, FL 32413

**New Principal Place of Business:**

**Current Mailing Address:**

1591 COUNTY ROAD 136  
LEXINGTON, AL 35648

**New Mailing Address:**

**FEI Number:** 45-4227528

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

BONNEY, GARTH D ESQ.  
445 GRACE AVENUE  
PANAMA CITY, FL 32401 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:** TONER, MARK A  
**Address:** 217 JACKSON AVENUE  
**City-St-Zip:** ROGERSVILLE, AL 35652

**Title:** MGRM  
**Name:** TONER, BETH  
**Address:** 217 JACKSON AVE  
**City-St-Zip:** ROGERSVILLE, AL 35652

**Title:** MGRM  
**Name:** RONALD W. TONER & RENITA TONER  
**Address:** 1591 COUNTY RD 136  
**City-St-Zip:** LEXINGTON, AL 35648

**Title:** MGRM  
**Name:** MARK HAMMOND AND KIM HAMMOND  
**Address:** 6630 COUNTY RD 89  
**City-St-Zip:** LEXINGTON, AL 35648

**Title:** MGRM  
**Name:** LEIBECKI, BENJAMIN  
**Address:** 4263 HIGHWAY 207  
**City-St-Zip:** ANDERSON, AL 35610

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:** RENITA TONER

MGRM

04/12/2012

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