


**2004 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Mar 11, 2004 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # L98000001791</b> 1. Entity Name <b>BEACH THEATER, L.L.C.</b>	
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Principal Place of Business <b>6425 ESTERO BLVD. FORT MYERS BEACH, FL 33931</b>	Mailing Address <b>4851 TAMiami TRAIL N SUITE 300 NAPLES, FL 34103</b>
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**DO NOT WRITE IN THIS SPACE**



02242004 No Chg-LLC CR2E083 (10/03)

4. FEI Number <b>59-3535762</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required

6. Name and Address of Current Registered Agent

**HOFFMAN, HARVEY  
4851 TAMiami TRAIL N  
SUITE 300  
NAPLES, FL 34103**

**DO NOT WRITE  
IN THIS SPACE**

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 reinstating) DATE

**Filing Fee is \$50.00  
Due by May 1, 2004**


UN00000085506  
03/11/04-80050-009 50.00

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>MGR HOFFMAN, HARVEY 4851 TAMiami TRAIL N, #300 NAPLES, FL 34103</b>
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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 608, Florida Statutes.

**SIGNATURE:**  **2/26/04 (239) 430-8100**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #