


**2004 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Mar 31, 2004 08:00 AM
Secretary of State

DOCUMENT # L98000002878 1. Entity Name FIFTH AVENUE BEACH CLUB, L.L.C.	
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Principal Place of Business 175 5TH AVE SOUTH 107 & 207 NAPLES, FL 34103	Mailing Address 812 WILLOWWOOD LANE NAPLES, FL 34108
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DO NOT WRITE IN THIS SPACE



03192004No Chg-LLC

CR2E083 (10/03)

4. FEI Number 59-3546862	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	

6. Name and Address of Current Registered Agent

CRONIN, DENNIS P ESQ.
4001 TAMiami TRAIL NORTH
SUITE 404
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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)


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

000000100114
03/31/04-80033-011 55.00

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR BEVINS, DONALD 812 WILLOWWOOD LANE NAPLES, FL 34108
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IN THIS SPACE**

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 606, Florida Statutes.

SIGNATURE:  **Don Berins** 3/24/04 (239) 572-7092
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #