

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 28, 2005 8:00 am
Secretary of State

04-28-2005 90024 016 ****55.00

DOCUMENT # M00000002597	
1. Entity Name LIGHTSPEED BEACON PARTNERS GP LLC	

Principal Place of Business 3390 MARY STREET SUITE 200 COCONUT GROVE, FL 33133 US	Mailing Address 321 EAST HILLSBORO BLVD. DEERFIELD BEACH, FL 33441 US
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14002785



2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

02242005 Chg-LLC CR2E083 (10/03)

4. FEI Number 52-2284446	Applied For Not Applicable
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5. Certificate of Status Desired ☒ YES	\$5.00 Additional Fee Required
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6. Name and Address of Current Registered Agent STOTZER, THEODORE R C/O SWERDLOW BOCA DEVELOPERS GROUP, LLC 321 EAST HILLSBORO BLVD DEERFIELD BEACH, FL 33441

7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	FL Zip Code

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, 2005**

**Make check payable to
Florida Department of State**

9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM BONFISH PARTNERS LLC 3390 MARY STREET, SUITE 200 COCONUT GROVE, FL 33133 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 118.07(3)(f), 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.

BY: BONFISH PARTNERS, LLC, its Managing Member

SIGNATURE: By:

April 15, 2005 (954) 949-3480

SIGNATURE AND TYPE OF PRINTED NAME OF PERSON OR ENTITY, MANAGER, OR AUTHORIZED REPRESENTATIVE
Michael Swerdlow, Management Committee Chairman