

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000036841

**FILED**  
**Jan 13, 2014**  
**Secretary of State**  
**CC8939274964**

**Entity Name:** BEBACK ENTERPRISES, LLC

**Current Principal Place of Business:**

4430 MCASHTON STREET  
SARASOTA, FL 34233

**Current Mailing Address:**

4240 DEREK WAY  
SARASOTA, FL 34233 US

**FEI Number:** 20-8807083

**Certificate of Status Desired:** No

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

ACKERLAND, CAROLYN M  
4240 DEREK WAY  
SARASOTA, FL 34233 US

*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

**Authorized Person(s) Detail :**

Title MGRM  
Name ACKERLAND, CAROLYN M  
Address 4463 DON MEYER DRIVE  
City-State-Zip: SARASOTA FL 34233

Title MGR  
Name ACKERLAND, TIMOTHY H  
Address 4463 DON MEYER DRIVE  
City-State-Zip: SARASOTA FL 34233

Title MGR  
Name ACKERLAND, SUZAN K  
Address 4687 OAK FOREST DRIVE EAST  
City-State-Zip: SARASOTA FL 34231

Title MGR  
Name BEBBER, STEVE  
Address 4250 BELL AVENUE  
City-State-Zip: SARASOTA FL 34231

Title MGR  
Name BEBBER, DARCY  
Address 4250 BELL AVENUE  
City-State-Zip: SARASOTA FL 34231

*I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** CAROLYN ACKERLAND

**MGR**

**01/13/2014**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date