

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000007364

FILED
Jan 13, 2008
Secretary of State

Entity Name: SEACREST ESTATE PROPERTIES, L.L.C.

Current Principal Place of Business:

946 TROPIC BLVD.
DELRAY BEACH, FL 33483

New Principal Place of Business:

Current Mailing Address:

946 TROPIC BLVD.
DELRAY BEACH, FL 33483

New Mailing Address:

FEI Number: 01-0645383 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

RIPPS, ANDREW S
946 TROPIC BLVD
SUITE 1720
DELRAY BEACH, FL 33483 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: MGR () Delete
Name: RIPPS, LINDA J
Address: PO BOX 7105
City-St-Zip: DELRAY BEACH,, FL 33482

Title: MGR () Delete
Name: RIPPS, ANDREW S
Address: PO BOX 7105
City-St-Zip: DELRAY BEACH,, FL 33482

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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: ANDREW RIPPS

MGR

01/13/2008

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