## 2007 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

## FILED Jan 24, 2007 8:00 am Secretary of State

DOCUMENT # L03000023337  1. Entity Name SEBEDEL, L.L.C.						01-24-2007 9	90049 0:	30 ****50	0.00
Principal Place of Business  739 HOLDEN AVE SEBASTIAN, FL 32958  Mailing Address  739 HOLDEN AVE SEBASTIAN, FL 32958						6000547	21		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.		01122007	Chg-LLC	CR2E0	83 (12/06)		
City & State		City & State		4. FEI Number 20-0236				plied For at Applicable	
Zip	Country	Zip	Coun	try	5. Certificate of	of Status Desired		\$5.00 Add Fee Require	
	6. Name and Address of Current	Registered Agent			7. Name and	Address of New Re	egistered A	Agent	.,
	14			Name					
BLOOM, GWEN D 320 W. SABAL PALM PLACE SUITE300		Street Addr		Street Address (	s (P.O. Box Number is Not Acceptable)				
LONGWOOD, FL 32779				ı					
		City		City			FL	Zip Cod	е
	named entity submits this statement for ions of registered agent.	r the purpose of changing its	registere	ed office or register	red agent, or both	, in the State of Flo	rida. I am I	amiliar with,	and accept
SIGNATURE .	Signature, hiped or printed name of registered agent	and title if applicable. (NOTE	: Registered	d Agent signature requires	1 when (binetation)		DATE		
					s (en on rematating)				
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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 of trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:
SIGNATURE AND TYPED OR PRINTED NAME OF SENING MANAGER, OR AUTHORIZED REPRESENTATIVE
DOLLAR

7725810016

Daytime Phone #