2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000012486

Address:

City-St-Zip:

1721 FLAGLER AVENUE

ATLANTA, GA 30309

Entity Name: SEASONALIMPORTS.COM, L.L.C.

FILED Jan 30, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 6871 BELFORT OAKS PLACE JACKSONVILLE, FL 32216 **Current Mailing Address: New Mailing Address:** PO BOX 551260 JACKSONVILLE, FL 32255 FEI Number: 59-3678012 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SCHNEIDER, MICHAEL N ANSBACHER & SCHNEIDER PA 5150 BELFORT ROAD, BUILDING 100 5150 BELFORT ROAD, BUILDING 100 JACKSONVILLE, FL 32256 JACKSONVILLE, FL 32256 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: ANSBACHER & SCHNEIDER PA 01/30/2008 Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete ZIMMERMAN, MORRIE Name: Name: 6871 BELFORT-OAKS PLACE Address: Address: City-St-Zip: JACKSONVILLE, FL 32216 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition Name: ZIMMERMAN, SEEMAN Name: Address: 6871 BELFORT-OAKS PLACE Address: City-St-Zip: JACKSONVILLE, FL 32216 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition ZIMMERMAN, CHARLES Name: Name: Address: 6871 BELFORT-OAKS PLACE Address: City-St-Zip: JACKSONVILLE, FL 32216 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition Name: RODBELL, KIM Name:

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.

Address:

City-St-Zip:

SIGNATURE: MORRIE ZIMMERMAN M 01/30/2008