## 2008 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

## **FILED** Apr 21, 2008 08:00 A Secretary of State **DOCUMENT # L00000006275** 1. Entity Name SEABOARD PARTNERS, L.C. Principal Place of Business Mailing Address 420 22ND ST SOUTH 420 22ND ST SOUTH SAINT PETERSBURG, FL 33705 SAINT PETERSBURG, FL 33705 . . . 61 01052008 No Chg-LLC CR2E083 (12/07) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 59-3703794 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent KNAUST, WARREN JESQ. DO NOT WRITE 2167 FIFTH AVE. NO. ST. PETERSBURG, FL 33713 IN THIS SPACE 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 segretared agent and title if applicable (NOTE, Registered Agent aignature required when revisiting) <u>Haaaaana taraa</u> 05/06/08-80097-003 138 75 FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75 MANAGING MEMBERS/MANAGERS 9. MGRM TITLE NAME COWEN, JAMES S. STREET ADDRESS 127 WILDWOOD LANE, S.E. CITY-ST-ZIP ST. PETERSBURG, FL 33705 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119. 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.

STAD COWER ER, OR AUTHORIZED REPRESENTATIVE

Daytime Phone #