2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L0000006337

Entity Name

SEDA PROPERTIES, L.L.C.



FILED Jan 06, 2003 8:00 am Secretary of State

01-06-2003 90133 021 ****50.00

Principal Place of Business			Mailing Address											
26423 STATE ROAD 46 SORRENTO FL 32776			PO BOX 1479 SORRENTO FL 32776						201) A A (1 11 2			
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2. Principal Place of Business			3. Mailing Address											
Suite, Apt. #, etc.			Suite, Apt. #, etc.				CHECK HERE IF MAKING CHANGES							
City & State			City & State			-	4. FEI Num	ber	59-364	19515			+	olied For Applicable
Zip Country			Zip	try		5. Certificate of Status Desired Specificate of Status Desired Fee Rec				\$5.00 Fee Reg	Addi	tional		
6. Name and Address of Current F			egistered Agent			L.	7. Name and Address of New Registered Agent							
CLEI	MENT, G. EDWARD		Name											ļ
. 308	EAST FIFTH AVENUE JNT DORA FL 32757			Street Address (P.O. Box Number is Not Acceptable)										
					City FL					Zip (Zip Code			
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	named entity submits this ons of registered agent.	s statement for the	e-purpose or changing its	registere	ed office of	registere	d agent, or t	Д	ine State	0111011	ua. ram	TELTIMET VI	1101, 0	and decept
SIGNATURE -	Signature, typed or printed name of	f registered agent and ti	itle if applicable. (NOTI	E: Registered	d Agent signatu	re required w	vhen reinstating)				DATE			
				OWIII F	FEE IS \$!	50.00								
			Make Check Payab				t of State							
			Due	e By Ma	ay 1, 2003	3								
9.		GING MEMBERS	/MANAGERS	10.					ADDIT	ONS/C	CHANGE			
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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 erricovered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTA

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