

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000014140

FILED
May 01, 2007
Secretary of State

Entity Name: SEABREEZE PROPERTIES, LLC

Current Principal Place of Business:

694 BALDWIN AVENUE, SUITE 1
DEFUNIAK SPRINGS, FL 32435

New Principal Place of Business:

Current Mailing Address:

2313 PINE CREST DRIVE
BIRMINGHAM, AL 35216

New Mailing Address:

FEI Number: 59-3706502 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

DAVIS, MARK D
694 BALDWIN AVENUE, SUITE 1
DEFUNIAK SPRINGS, FL 32435 US

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: JACOBS, RICHARD A CFO
Address: 2313 PINE CREST DR.
City-St-Zip: BIRMINGHAM, AL 35216

Title: MGRM () Delete
Name: RILEY, FRED H JR. CPM
Address: 400 N HOLIDAY ROAD
City-St-Zip: MIRAMAR BEACH, FL 32550

Title: MGRM () Delete
Name: JACOBS, NAN G TREAS
Address: 2313 PINE CREST DR.
City-St-Zip: BIRMINGHAM, AL 35216

Title: MGRM () Delete
Name: RILEY, JEAN EVP
Address: 400 N. HOLIDAY RD.
City-St-Zip: MIRAMAR BEACH, FL 32550

ADDITIONS/CHANGES:

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

Title: MGRM (X) Change () Addition
Name: RILEY, FRED H JR. CPM
Address: 40 SOUTH ANCHORS LAKE DR
City-St-Zip: SANTA ROSA BEACH, FL 32459

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

Title: MGRM (X) Change () Addition
Name: RILEY, JEAN EVP
Address: 40 SOUTH ANCHORS LAKE DR
City-St-Zip: SANTA ROSA BEACH, FL 32459

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: NAN G. JACOBS

MGRM

05/01/2007

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