

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000015728

**FILED**  
**Jan 20, 2006**  
**Secretary of State**

**Entity Name:** SEACOAST BROKERS OF FLORIDA, LLC

**Current Principal Place of Business:**

PMB 357, 1521 ALTON ROAD  
MIAMI BEACH, FL 33139

**New Principal Place of Business:**

**Current Mailing Address:**

PMB 357, 1521 ALTON ROAD  
MIAMI BEACH, FL 33139

**New Mailing Address:**

PO BOX 6126  
HILTON HEAD ISLAND, SC 29938

FEI Number: 65-1061350

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

HOVER, DAVID L  
PMB 357, 1521 ALTON ROAD  
MIAMI BEACH, FL 33139 US

**Name and Address of New Registered Agent:**

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: HOVER, DAVID L  
Address: PMB 357, 1521 ALTON ROAD  
City-St-Zip: MIAMI BEACH, FL 33139

Title: MGR ( ) Delete  
Name: HOVER, BRIAN L  
Address: 4 PENSACOLA PLACE  
City-St-Zip: HILTON HEAD ISLAND, SC 29928

**ADDITIONS/CHANGES:**

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

Title: MGR (X) Change ( ) Addition  
Name: HOVER, BRIAN L  
Address: 88A MAIN STREET  
City-St-Zip: HILTON HEAD ISLAND, SC 29926

I hereby certify that the information supplied with this filing does not qualify for the 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: DAVID HOVER

CEO

01/20/2006

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