

**2004 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Mar 03, 2004 08:00 AM
Secretary of State

DOCUMENT # L01000010036

1. Entity Name
SEAMAX OF HUNTERS RIDGE, LLC



Principal Place of Business
**211 E. INTERNATIONAL SPEEDWAY BLVD
STE 21
DAYTONA BEACH, FL 32118**

Mailing Address
**211 E. INTERNATIONAL SPEEDWAY BLVD
STE 21
DAYTONA BEACH, FL 32118**



02102004 No Chg-LLC

CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3727196

Applied For
☐ Not Applicable

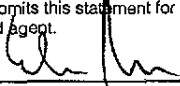
5. Certificate of Status Desired ☐ **\$5.00 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**AMON, URSULA
211 E. INTERNATIONAL SPEEDWAY BLVD, STE 21
3
DAYTONA BEACH, FL 32118**

**DO NOT WRITE
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 registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

2/25/04

**Filing Fee is \$50.00
Due by May 1, 2004**

**U00000074212
03/03/04-80010-001 50.00**

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**MGRM
GAZZOLI, JOHN
185 CYPRESS POINT PARKWAY, SUITE 7
PALM COAST, FL 32164**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**MGRM
AMON, FELIX
211 E INT'L SPEEDWAY BLVD #213
DAYTONA BEACH, FL 32118**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**MGR
AMON, URSULA
211 E INT'L SPEEDWAY BLVD #213
DAYTONA BEACH, FL 32118**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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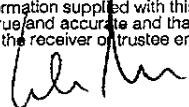
11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

 **Ursula Amon**

2/25/04