

**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jul 08, 2005 8:00 am
Secretary of State

07-08-2005 90090 009 ****50.00

DOCUMENT # L02000002052

1. Entity Name
SEER GROUP, LLC



Principal Place of Business
**415 N HILLSBOROUGH AVE
ARCADIA, FL 34266**

Mailing Address
**415 N HILLSBOROUGH AVE
ARCADIA, FL 34266**

14018355



DO NOT WRITE IN THIS SPACE

05022005No Chg-LLC

CR2E083 (10/03)

4. FEI Number
03-0383147

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**BLEDSON, ERIC T
415 N HILLSBOROUGH AVE
ARCADIA, FL 34266**

**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

**Filing Fee is \$50.00
Due by September 7, 2005**

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**MGRM
BLEDSON, ERIC T
~~13310 CORBEL CIRCLE #1816~~
~~FORT MYERS, FL 33907~~**

**9846 SW 6 Rd 769
ARCADIA FL 34269**

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 #