2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Apr 12, 2007 08:00 AM Secretary of State

DOCUMENT	Г#1	ハつ の	ሰሰሰ	ነህጸዕ:	7/
しんしんかいロロ	I # L	UZU	w	JUOST	/4

1. Entity Name

SEAGULL PROPERTIES COMPANY, LLC



Principal Place of Business

351 SEA GRAPE RD. VENICE, FL 34293 Mailing Address

351 SEA GRAPE RD. VENICE, FL 34293



03012007 No Chg-LLC

CR2E083 (11/05)

4.	FEI Number		Applied For	
	02-0583669	 ,	Not Applicable	
5.	Certificate of Status Desired	\$5.00 Additional Fee Required		

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

MIHALEC, SAMUEL R 351 SEA GRAPE RD. VENICE, FL 34293

TITLE

NAME STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS CITY-ST-ZIP

DO NOT WRITE IN THIS SPACE

The above named entity submits this statement for the purpose of chathe obligations of registered agent.	nging its registered office or registered agent, or both, in	the State of Florida. I am familiar with, and accept
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 May 1, 2007		

MANAGING MEMBERS/MANAGERS MGR TITLE MIHALEC, SAMUEL R NAME STREET ADDRESS 351 SEA GRAPE RD. CITY-ST-ZIP VENICE, FL 34293 MGR TITLE NAME STINSON, ELIZABETH STREET ADDRESS 351 SEA GRAPE RD. CITY-ST-ZIP VENICE, FL 34293 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-SI-ZIP

000000700902 04/20/07-80035-010 55.00

DO NOT WRITE IN THIS SPACE

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:

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

4-9-07

941-493-6276

Date

Daytime Phone #