

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Mar 13, 2006 08:00 AM
Secretary of State

DOCUMENT # L02000021833

1. Entity Name
ILA SEA, LLC



Principal Place of Business
615 WOODHAVEN DR.
OPP, AL 36467

Mailing Address
615 WOODHAVEN DRIVE
OPP, AL 36467



01242006 No Chg-LLC

CRZE083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
16-1623966

Applied For
Not Applicable

5. Certificate of Status Desired



\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

BRANNON, GEORGE T SR
14 CLAYTON LANE
SUITE 14
GRAYTON BEACH, FL 32459

**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 May 1, 2008

1800000456855
03/23/06-80027-009 \$5.00

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
MGR
SULLIVAN, JIM
615 WOODHAVEN DR.
OPP, AL 36467

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

**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: *Rebecca S. Sullivan*

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

3-7-06 *334-493-3149*

Date

Daytime Phone #