

2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 05, 2003 8:00 am
Secretary of State

04-28-2003 90098 007 ***150.00

DOCUMENT # L02000022660

1. Entity Name

SEASIDE COTTAGES OF ST. AUGUSTINE BEACH, LLC



Principal Place of Business

**4811 ATLANTIC BOULEVARD, SUITE 300
JACKSONVILLE FL 32207**

Mailing Address

**4811 ATLANTIC BOULEVARD, SUITE 300
JACKSONVILLE FL 32207**

55055751

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

54-2070533

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

**MILONAS, TASSO M
1800 SECOND STREET, SUITE 884
SARASOTA FL 34236**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Florida Department of State
Due By May 1, 2003

9. MANAGING MEMBERS/MANAGERS

TITLE	Vice President	<input type="checkbox"/> Delete
NAME	Theodore M. Johns	
STREET ADDRESS	4811 Atlantic Blvd	
CITY-ST-ZIP	Jacksonville, FL 32207	
TITLE	President	<input type="checkbox"/> Delete
NAME	Hermes Erasclides	
STREET ADDRESS	4811 Atlantic Blvd.	
CITY-ST-ZIP	Jacksonville, FL 32207	
TITLE	Secretary	<input type="checkbox"/> Delete
NAME	Brad Hall	
STREET ADDRESS	4811 Atlantic Blvd.	
CITY-ST-ZIP	Jacksonville, FL 32207	
TITLE	Treasurer	<input type="checkbox"/> Delete
NAME	Mark H. Gelman	
STREET ADDRESS	4811 Atlantic Blvd.	
CITY-ST-ZIP	Jacksonville, FL 32207	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

10. ADDITIONS/CHANGES

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

SIGNATURE REQUIRED: Mark H. Gelman

4-25-03

904-306-9955

CPRE083 (10/02)

attachment

#55055751

Seaside Cottages of St. Augustine Beach, LLC
4811 Atlantic Blvd.
Jacksonville, Florida 32207

September 3, 2003

Florida Department of State
Division of Corporations
P.O. Box 6478
Tallahassee, Florida 32314


Subject: Annual Report/Uniform Business

Reference: L02000022660

Enclosed please find a copy of the above referenced report with the corrections that were previously made and sent.

Due to an error in our payables department, a check in the amount of \$150.00 was sent along with the original report. Please refund the overpayment of \$100.00 as soon as possible.

Sincerely,



Mark H. Gelman
Treasurer

MHG/ctw

RECEIVED
SEP 10 2003
FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA 32314