

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED

Mar 10, 2008 08:00 AM
Secretary of State

DOCUMENT # L02000024216

1. Entity Name
SEABREEZE FLORIDA, L.L.C.



Principal Place of Business
103 HIGHLAND AVE
BRADENTON BEACH, FL 34217-2444

Mailing Address
PO BOX 2551
TARPON SPRINGS, FL 34668-2551



03042008 No Chg-LLC

CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number
13-4216484

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

RANDELMAN, P.H.
PO BOX 2551
TARPON SPRINGS, FL 34688

**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 remitting)

DATE

**FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75**

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGR
RANDELMAN, P.H.
PO BOX 2551
TARPON SPRINGS, FL 346882551

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGR
RANDELMAN, R.E.
PO BOX 2551
TARPON SPRINGS, FL 346882551

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CITY-ST-ZIP

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000000851541
03/25/08-80043-012 138.75

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

Date

Daytime Phone #

PH Randelman PH Randelman 3/4/08 727 939 4654