

# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000034664

FILED  
Apr 27, 2004  
Secretary of State

Entity Name: SOUTHEAST COMMUNITIES, LLC

**Current Principal Place of Business:**

333 THIRD AVENUE NORTH STE. 400  
ST. PETERSBURG, FL 33701

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 429  
SAINT PETERSBURG, FL 33731

**New Mailing Address:**

FEI Number: 65-1167051

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

IRWIN, IAN F  
333 THIRD AVENUE NORTH STE. 400  
ST. PETERSBURG, FL 33701

**Name and Address of New Registered Agent:**

JENKINS, DAVID A  
333 THIRD AVENUE NORTH STE. 400  
ST. PETERSBURG, FL 33701

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.

SIGNATURE: DAVID A JENKINS

04/27/2004

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MEMBERS:**

Title: MGR ( ) Delete  
Name: IRWIN, IAN F  
Address: 333 THIRD AVENUE NORTH STE. 400  
City-St-Zip: ST. PETERSBURG, FL 33701

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: JJM FUND MANAGEMENT, LLC  
Address: PO BOX 267  
City-St-Zip: ST THOMAS, VI 00804

Title: MGRM ( ) Change (X) Addition  
Name: JENKINS, DAVID A  
Address: 333 THIRD AVENUE N SUITE 400  
City-St-Zip: ST PETERSBURG, FL 33701

Title: MGRM ( ) Change (X) Addition  
Name: BRETT, DAVID A  
Address: 333 THIRD AVENUE N SUITE 400  
City-St-Zip: ST PETERSBURG, FL 33731

Title: MGRM ( ) Change (X) Addition  
Name: ALAGON JOINT VENTURE,  
Address: 333 THIRD AVENUE N SUITE 400  
City-St-Zip: ST PETERSBURG, FL 33731

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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: IAN F IRWIN, MANAGER

MGR

04/27/2004

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date