

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000034664

FILED
Apr 26, 2006
Secretary of State

Entity Name: SOUTHEAST COMMUNITIES, LLC

Current Principal Place of Business:

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

Current Mailing Address:

PO BOX 429
ST. PETERSBURG, FL 33731

New Principal Place of Business:

333 3RD AVENUE NORTH
SUITE 400
ST. PETERSBURG, FL 33701 US

New Mailing Address:

PO BOX 429
ST. PETERSBURG, FL 33731 US

FEI Number: 65-1167051

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

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

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

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

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

Title: MGRM () Delete
Name: BRETT, DAVID A
Address: 333 THIRD AVENUE N SUITE 400
City-St-Zip: ST PETERSBURG, FL 33701 US

Title: MGRM () Delete
Name: ALAGON JOINT VENTURE,
Address: 333 THIRD AVENUE N SUITE 400
City-St-Zip: ST PETERSBURG, FL 33701 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: JJM FUND MANAGEMENT, LLC
Address: 333 3RD AVENUE NORTH, SUITE 400
City-St-Zip: ST PETERSBURG, FL 33701 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGRM (X) Change () Addition
Name: BRETT, DAVID A
Address: 333 3RD AVENUE N SUITE 400
City-St-Zip: ST PETERSBURG, FL 33701 US

Title: MGRM (X) Change () Addition
Name: ALAGON JOINT VENTURE,
Address: 333 3RD AVENUE N SUITE 400
City-St-Zip: ST PETERSBURG, FL 33701 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: DAVID A. JENKINS

MGRM

04/26/2006

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