## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L02000034664

Address:

City-St-Zip:

333 3RD AVENUE N SUITE 400

ST PETERSBURG, FL 33701 US

Entity Name: SOUTHEAST COMMUNITIES, LLC

FILED Apr 24, 2007 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 333 3RD AVENUE NORTH SUITE 400 ST. PETERSBURG, FL 33701 US **New Mailing Address: Current 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: Name and Address of New Registered Agent: JENKINS, DAVID A 333 THIRD AVENUE NORTH SUITE 400 ST. PETERSBURG, FL 33701 US 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: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete JJM FUND MANAGEMENT, LLC Name: Name: 333 3RD AVENUE NORTH, SUITE 400 Address: Address: City-St-Zip: ST PETERSBURG, FL 33701 US City-St-Zip: Title: MGRM () Delete Title: () Change () Addition Name: JENKINS, DAVID A Name: Address: 333 THIRD AVENUE N SUITE 400 Address: City-St-Zip: ST PETERSBURG, FL 33701 US City-St-Zip: Title: MGRM () Delete Title: () Change () Addition BRETT, DAVID A Name: Name: 333 3RD AVENUE N SUITE 400 Address: Address: City-St-Zip: ST PETERSBURG, FL 33701 US City-St-Zip: Title: MGRM ( ) Delete Title: () Change () Addition Name: ALAGON JOINT VENTURE, Name:

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.

Address:

City-St-Zip:

SIGNATURE: JEAN GETTING IRWIN MGR 04/24/2007