2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

Apr 29, 2008 8:00 am Secretary of State 04-29-2008 90022 032 ***143 75 DOCUMENT # L03000000849 1. Entity Name SEA PINES I, L.C. 60031293 Principal Place of Business Mailing Address 2901 WEST BUSCH BOULEVARD 2901 WEST BUSCH BOULEVARD #901 #901 TAMPA, FL 33618 TAMPA, FL 33618 01082008 No Cha-LLC CR2E083 (12/07) DO NOT WRITE IN THIS SPACE 4. FEI Numbe Applied For 45-0500885 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent BEKIEMPIS, VINCENT DO NOT WRITE 2901 WEST BUSCH BOULEVARD #901 IN THIS SPACE TAMPA, FL 33618 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75 MANAGING MEMBERS/MANAGERS 9. TITLE MGR NAME BEKIEMPIS, VINCENT STREET ADDRESS 2901 WEST BUSCH BOULEVARD #901 CITY-ST-ZIP TAMPA, FL 33618 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE

g does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the vered to execute this report as required by Chapter 608, Florida Statutes. 11. I hereby certify that the info indicated on this report is 1 ation supplied with the e and accurate and that m limited liability company

SIGNATURE:

NAME. STREET ADDRESS CITY-ST-ZIP HTLE NAME STREET ADDRESS CITY ST-ZIP

MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

FILED