

**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED

**Mar 25, 2005 08:00 AM
Secretary of State**

DOCUMENT # L03000002913

1. Entity Name
SEAL PROPERTIES, LLC



Principal Place of Business

**919 NORSOTA WAY
SARASOTA, FL 34242**

Mailing Address

**919 NORSOTA WAY
SARASOTA, FL 34242**



03182005 No Chg-LLC

CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number

55-0816168

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

**SILBERSTEIN, DAVID M
720 SOUTH ORANGE AVENUE
SARASOTA, FL 34236**

**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 re-registering)

DATE

**Filing Fee is \$50.00
Due by May 1, 2005**

9. MANAGING MEMBERS/MANAGERS

TITLE	MGR
NAME	ASSELSTINE, ALLAN
STREET ADDRESS	919 NORSOTA WAY
CITY - ST - ZIP	SARASOTA, FL 34242
TITLE	MGR
NAME	SEIDEL, BARRY C
STREET ADDRESS	7330 SOUTH TAMiami TRAIL
CITY - ST - ZIP	SARASOTA, FL 34231

U000001275749
03/25/05-80012-015 50.00

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11. I hereby certify that the information supplied with this filing does not qualify 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 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

Day, To Phone #

[Signature] MEMBER **Allan Asselstine** 3-18-05 941-349-2633