2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 17, 2006 08:00 AM
Secretary of State

DOCUMENT # L03000002913

1. Entity Name
SEAL PROPERTIES, LLC

Principal Place of Business	Mailing Address
919 NORSOTA WAY SARASOTA, FL 34242	919 NORSOTA WAY SARASOTA, FL 34242

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03142006No Chg-LLC CR2E083 (11/05)

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

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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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when electronically)

Filing Fee is $50.00
Due by May 1, 2006

U00000472577
03/29/06-80042-008 50.00

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
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: Allan Asselstine MEMBER 3-14-06 941-349-2633
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #