

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000016668

FILED  
Apr 26, 2007  
Secretary of State

Entity Name: SEACREST HOLDINGS, L.L.C.

## Current Principal Place of Business:

42 BUSINESS CENTRE DRIVE  
SUITE 304  
MIRAMAR BEACH, FL 32550 US

## New Principal Place of Business:

## Current Mailing Address:

42 BUSINESS CENTRE DRIVE  
SUITE 304  
MIRAMAR BEACH, FL 32550 US

## New Mailing Address:

FEI Number: 20-0018405

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MATTHEWS, DANA C ESQ  
4475 LEDENDARY DRIVE BOX 40  
DESTIN, FL 32541 US

## Name and Address of New Registered Agent:

MATTHEWS, DANA C ESQ  
MATTHEWS & HAWKINS, P.A.  
4475 LEGENDARY DRIVE  
DESTIN, FL 32541 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: DANA C. MATTHEWS

04/26/2007

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete  
Name: FLEISHER, DAVID E  
Address: 99 GARNETT PLACE  
City-St-Zip: DESTIN, FL 32541 US

Title: MGRM ( ) Delete  
Name: SEACREST DEVELOPMENT, CD, INC  
Address: 42 BUSINESS CENTRE DRIVE, SUITE 304  
City-St-Zip: MIRAMAR BEACH, FL 32550 US

## ADDITIONS/CHANGES:

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

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

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

MGR

04/26/2007

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