

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000035418

FILED
Sep 15, 2009
Secretary of State

Entity Name: SEALAND CONTRACTING, LLC

Current Principal Place of Business:

1111 SE 3 AVE.
FT LAUDERDALE, FL 33316

New Principal Place of Business:

Current Mailing Address:

3440 RT 96-A
GENEVA, NY 14456

New Mailing Address:

11 SE 3 AVE
FT LAUDERDALE, FL 33316

FEI Number: 20-0232277 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

CECERE, LEONARD
1111 SE 3 AVE.
FT. LAUDERDALE, FL 33316 US

Name and Address of New Registered Agent:

CECERE, MICHAEL
1111 SE 3 AVE.
FT. LAUDERDALE, FL 33316 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: MICHAEL CECERE

09/15/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: CECERE, LEONARD MR.
Address: 216 ROSE DR.
City-St-Zip: FT. LAUDERDALE, FL 33316

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: CECERE, LEONARD
Address: 316 ROSE DR
City-St-Zip: FT. LAUDERDALE, FL 33316

Title: MGR () Change (X) Addition
Name: MICHAEL, CECERE
Address: 1111 SE 3 AVE.
City-St-Zip: FT LAUDERDALE, FL 33316

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: MICHAEL CECERE

MGR

09/15/2009

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