2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000052708

Entity Name: SEA JOY, LLC

FILED Apr 30, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

12944 PRESTWICK DRIVE 3500 CASABLANCA AVENUE RIVERVIEW, FL 33569 ST. PETE BEACH, FL 33706

Current Mailing Address: New Mailing Address:

823 CYPRESS VILLAGE BLVD 3500 CASABLANCA AVENUE SUN CITY CENTER, FL 33573 ST. PETE BEACH, FL 33706

FEI Number: 20-0480584 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

LANESE, NICHOLAS 823 CYPRESS VILLAGE BLVD SUN CITY CENTER, FL 33573

MANAGING MEMBERS/MANAGERS:

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:

Electronic Signature of Registered Agent Date

Electronic eignature of registered rig

US

ADDITIONS/CHANGES:

Title: MGRM () Delete Title: MGRM (X) Change () Addition Name: LANESE, NICHOLAS Name: LANESE, NICHOLAS

Address: 12944 PRESTWICK DRIVE Address: 3500 CASABLANCA AVENUE City-St-Zip: RIVERVIEW, FL 33569 City-St-Zip: ST. PETE BEACH, FL 33706

Title: MGRM () Delete Title: MGRM (X) Change () Addition

Name: LANESE, KAREN S Name: LANESE, KAREN S
Address: 12944 PRESTWICK DRIVE Address: 3500 CASABLANCA AVENUE

Address: 12944 PRESTWICK DRIVE Address: 3500 CASABLANCA AVENUE City-St-Zip: RIVERVIEW, FL 33569 City-St-Zip: ST. PETE BEACH, FL 33706

Title: MGRM () Delete Title: () Change () Addition

 Name:
 ALTIERI, RAYMOND A JR.
 Name:

 Address:
 14927 DEVONSHIRE WOODS PLACE
 Address:

 City-St-Zip:
 TAMPA, FL 33624
 City-St-Zip:

Title: MGRM () Delete Title: () Change () Addition

 Name:
 ALTIERI, DOREEN M
 Name:

 Address:
 14927 DEVONSHIRE WOODS PLACE
 Address:

 City-St-Zip:
 TAMPA, FL 33624
 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: KAREN S. LANESE MGRM 04/30/2009