

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L03000053904

**FILED**  
**Jan 17, 2012**  
**Secretary of State**

**Entity Name:** SELENE COASTAL EXPERIENCE, LLC

**Current Principal Place of Business:**

103 SNEED DRIVE  
TAYLORS, SC 29687

**New Principal Place of Business:**

**Current Mailing Address:**

103 SNEED DRIVE  
TAYLORS, SC 29687

**New Mailing Address:**

**FEI Number:** 57-1196037

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

C. TED FRENCH  
2033 MAIN STREET, SUITE 304  
SARASOTA, FL 34237 US

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

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

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: MACATEE, MICHAEL  
Address: 103 SNEED DRIVE  
City-St-Zip: TAYLORS, SC 29687

I hereby 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 R. MACATEE

MGRM

01/17/2012

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