

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Mar 13, 2006 08:00 AM
Secretary of State

DOCUMENT # L04000004361

1. Entity Name
SEMINOLE LANDING, L.L.C.



Principal Place of Business
**2215 SOUTH THIRD ST, STE 101
JACKSONVILLE BEACH, FL 32250**

Mailing Address
**2215 SOUTH THIRD ST, STE 101
JACKSONVILLE BEACH, FL 32250**



03062006 No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
56-2433383

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

**AHERN, FRED L JR
2215 SOUTH THIRD ST, STE 101
JACKSONVILLE BEACH, FL 32250**

**DO NOT WRITE
IN THIS SPACE**

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 _____

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**Filing Fee is \$50.00
Due by May 1, 2006**

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PT
AHERN, FRED L JR
2215 SOUTH THIRD ST, STE 101
JACKSONVILLE BEACH, FL 32250**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VP
ECKSTEIN, JOSEPH P
2215 SOUTH THIRD ST, STE 101
JACKSONVILLE BEACH, FL 32250**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VP
SLEIMAN, ELI T JR
2215 SOUTH THIRD ST, STE 101
JACKSONVILLE BEACH, FL 32250**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**S
WALCHLE, BART A
2215 SOUTH THIRD ST, STE 101
JACKSONVILLE BEACH, FL 32250**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

1110000456746
03/23/06-80022-025 50.00

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IN THIS SPACE**

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: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Fred L. Ahern, Jr

3/9/06

Date

904-246-9994

Daytime Phone #