

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000023015

Entity Name: SEACOAST, LLC

FILED
May 01, 2007
Secretary of State

Current Principal Place of Business:

P.O. BOX 489
ISLAMORADA, FL 33036

New Principal Place of Business:

82539 OLD ROAD
ISLAMORADA, FL 33036

Current Mailing Address:

P.O. BOX 489
ISLAMORADA, FL 33036

New Mailing Address:

FEI Number: 20-1385019 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:

SANCHEZ, ROBERTA L
82539 OLD ROAD
ISLAMORADA, FL 33036 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 () Delete
Name: LINDBACK, CHERYL A
Address: P.O. BOX 489
City-St-Zip: ISLAMORADA, FL 33036

Title: MGRM () Delete
Name: LINDBACK, CARL E III
Address: P.O. BOX 489
City-St-Zip: ISLAMORADA, FL 33036

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: CARL LINDBACK

MGRM

05/01/2007

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