2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L04000033462 1. Entity Name SEACREST BEACH PROPERTIES, LLC



FILED

08 JUL -8 PM 2:40

Principal Place of Business 1844 FIDDLER COURT SUITE A TALLAHASSEE, FL 32308 Mailing Address P.O. BOX 13561 TALLAHASSEE, FL 32317 SECRETARY OF STATE TALLAHASSEE, FLORIDA



DATE

800132922408 07/15/08--01007--018 **\$38.75

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

KYNIO, STEPHEN J 1844 FIDDLER COURT, SUITE A TALLAHASSEE, FL 32308 07082008 No Chg-LLC

4. FEI Number

CR2E083 (12/07)

20-1157360 5. Certificate of Status Desired

\$5.00 Additional Fee Required

Applied For

Not Applicable

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 Rorida. I am familiar with, and accept the obligations of registered agent.

(NOTE: Registered Agent signature required when reinstating)

> FILE NOWIII FEE IS \$538.75 Due by September 12, 2008

9.	MANAGING MEMBERS/MANAGERS		
TITLE	MGRM		
NAME	KYNIO, STEPHEN J		
STREET ADDRESS	1844 FIDDLER COURT, SUITE A		
CITY-ST-ZIP	TALLAHASSEE, FL 32308		
TITLE	MGRM		
NAME	SNEED, RICHARD W		
STREET ADDRESS	1844 FIDDLER COURT, SUITE A		
CITY-ST-ZIP	TALLAHASSEE, FL 32308		
TITLE			
NAME			
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11. I hereby certify that the information supplied with this filing does not adality for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and they my signature shall have the same fegal effect as if made under oath; that I am a managing member or manager of the timited liability company or the receiver or trustee enhowener to execute this report as required by Chapter 608, Florida Statutes. SIGNATURE: 7-9-08 850-545-			
SIGNATURE: 7-3-08 850-545-			
SIGNATURE:			
SIGNATURE AND TYPED OR PRINTED NAME & SIGNARD MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Dato Devite Phone #			