2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT

DOCUMENT # L04000037950

1. Entity Name
SEAVIEW SURF CLUB, LLC

Principal Place of Business	Mailing Address
6394 LONGLAKE DRIVE PORT ORANGE, FL 32128	6394 LONGLAKE DRIVE PORT ORANGE, FL 32128

DO NOT WRITE IN THIS SPACE

01032006No Chg-LLC   CR2E083 (11/05)

4. FEI Number	Applied For
57-1214945	Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

SQUIRES, RANDY
6394 LONGLAKE DRIVE
PORT ORANGE, FL 32128

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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

U00000382802
01/12/06-80027-015 50.00

9.   MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	SQIRES, RANDY
STREET ADDRESS	6394 LONGLAKE DRIVE
CITY-ST-ZIP	PORT ORANGE, FL 32128
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
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CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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: _____   1/5/06

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE   Date   Daytime Phone #