## 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000038457

Entity Name: SEASIDE ASSETS, LLC

FILED Jul 04, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

209 STELLAR COURT 1102 ALMOND TREE CIRCLE

PONTE VEDRA BEACH, FL 32082 ORLANDO, FL 32835

Current Mailing Address: New Mailing Address:

209 STELLAR COURT 1102 ALMOND TREE CIRCLE

PONTE VEDRA BEACH, FL 32082 ORLANDO, FL 32835

FEI Number: 20-1240025 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: Name and Address of New Registered Agent:

SHERWOOD, KRIS SHERWOOD, KRIS B 209 STELLAR COURT SHERWOOD TREE CIRCLE

209 STELLAR COURT 1102 ALMOND TREE CIRCLE PONTE VEDRA BEACH, FL 32082 US ORLANDO, FL 32835 US

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: KRIS BARNES SHERWOOD 07/04/2005

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGR () Delete Title: MGR (X) Change () Addition
Name: ATLANTIC HOME MANAGE, MENT CORP. Name: ATLANTIC HOME MANAGE, MENT CORP.

Address: 209 STELLAR COURT Address: 1102 ALMOND TREE CIRCLE

City-St-Zip: PONTE VEDRA BEACH, FL 32082 City-St-Zip: ORLANDO, FL 32835

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: KRIS BARNES SHERWOOD RA 07/04/2005