## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L04000052611

Entity Name: SEABAR, L.L.C.

**FILED** Apr 08, 2009 Secretary of State

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

12903 MAGNOLIA POINTE BOULEVARD CLERMONT, FL 34711

**Current Mailing Address: New Mailing Address:** 

12903 MAGNOLIA POINTE BOULEVARD CLERMONT, FL 34711

FEI Number: 20-1786182 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ELSWICK, REBECCA COX 12903 MAGNOLIA POINTE BOULEVARD CLERMONT, FL 34711

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:

Date

ADDITIONS/CHANGES:

Electronic Signature of Registered Agent

MANAGING MEMBERS/MANAGERS:

Title: (X) Change ( ) Addition () Delete

ELSWICK, REBECCA COX ELSWICK, REBECCA COX Name: Name: Address: 12903 MAGNOLIA POINTE BOULEVARD Address: 12903 MAGNOLIA POINTE BOULEVARD

CLERMONT, FL 34711 City-St-Zip: CLERMONT, FL 34711 City-St-Zip:

(X) Change ( ) Addition Title: MGRM () Delete Title: MGRM

Name: KNIGHT, ESTHER E Name: KNIGHT, ESTHER E

Address: 11 BLUE HOSTA WAY Address: 1637 FOREST HIGHLAND COURT

City-St-Zip: ROCKVILLE, MD 20850 City-St-Zip: SALEM, VA 24153

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: REBECCA C. ELSWICK **MGRM** 04/08/2009