

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000056303

Entity Name: SEASHORE PARTNERS, LLC

FILED
May 05, 2006
Secretary of State

Current Principal Place of Business:

15255 POOLE STREET, STE. A
GULFPORT, MS 39503

New Principal Place of Business:

Current Mailing Address:

15255 POOLE STREET, STE. A
GULFPORT, MS 39503

New Mailing Address:

FEI Number: 06-1730532 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:

DROWN, STEVEN P
236 CANAL PLACE
SANTA ROSA BEACH, FL 32459 US

Name and Address of New Registered Agent:

DROWN, STEVEN P
179 PELICAN CIRCLE
PANAMA CITY BEACH, FL 32459 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: STEVEN P. DROWN

05/05/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: DROWN, STEVEN P
Address: 236 CANAL PLACE
City-St-Zip: SANTA ROSA BEACH, FL 32459

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: DROWN, STEVEN P
Address: 179 PELICAN CIRCLE
City-St-Zip: PANAMA CITY BEACH, FL 32459

I hereby certify that the information supplied with this filing does not qualify for the 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: STEVEN P. DROWN

MGR

05/05/2006

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