ITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT #1.04000071036



FILED Mar 30, 2007 8:00 am Secretary of State

1. Entity Name SEA GATE LAND HOLDINGS V, LLC						03-30-2007 90035 022 ****50.00			
Principal Place	e of Business	3	Mailing Address						
19 NORTH BE Sarasota, F		OF THE PRESIDENTS, #60	5 19 NORTH BOULEVARD Sarasota, FL 34236	OF THE	PRESIDENTS,	#605			
	÷	• • • .							1811 10 161
2. Principal Place of Business - No P.O. Box #			3. Mailing Address						
Suite, Apt. #, etc.			Suite, Apt. #, etc.			03022007	Chg-LLC	CR2E083 (12/06	i)
City & State			City & State			4. FEI Numb 20-175		⊢	Applied For Not Applicable
Zip	Country Zig		Zip	Country		5. Certificate	e of Status Desired	□ \$5.00 A Fee Requi	
6. Name and Address of Current Registered Agent						7. Name an	d Address of New F	Registered Agent	
SILBERSTEIN, DAVID 720 SOUTH ORANGE AVENUE SARASOTA, FL 34236					David M Silberstein The Plaza Bldg 50 Central Ave, Ste 700 Sarasota, FL 34236			Zip Co	ode
	named entiti ions of regist	y submits this statement for tered agent.	the purpose of changing its	registere	d office or regis	stered agent, or bo	oth, in the State of FI	orida. I am familiar wit	h, and accept
SIGNATURE.	Signature, typed	or printed name of registered agent an	d title if applicable. (NOTE	: Registered	Agent signature requ	uired when reinstating)		DATE	
Filing Fee is \$50.00 Due by May 1, 2007								ke check payable to a Department of St	
9.		MANAGING MEMBER	S/MANAGERS	10.			ADDITIONS	/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR Delete MERRITT, BRIAN H 19 NORTH BOULEVARD OF THE PRESIDENTS, #605 SARASOTA, FL 34236				Invert Address 19	GR Change Addition ing Gitlin N. Blvd of the Presidents, #605 asota, FL 34236			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR Delete PORTER, TOWNSEND H JR. 19 NORTH BOULEVARD OF THE PRESIDENTS, #605 SARASOTA, FL 34236							☐ Chang	e Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	HOLLOWAY, JOE R 19 N BLVD OF THE PRESIDENTS #605				ET ADDRESS ST-ZIP			☐ Change	e Addition
TITLE NAME STREET ADDRESS CITY+ST-ZIP			☐ Delete		1			Change	e 🔲 Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	-		☐ Delete					☐ Chang	e Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete					☐ Chan g	e Addition
11. I hereby o	certify that th	e information supplied with t	this filiala does not quality for	the ever	notione contain	ad in Chanter 110	Florida Statutes III	further certify that the in	oformation