


2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 13, 2006 08:00 AM
Secretary of State

DOCUMENT # L04000081616

1. Entity Name
SEA BREEZE DEVELOPMENT, LLC



Principal Place of Business
**2814 TERN CT
 SAINT JAMES CITY, FL 33956**

Mailing Address
**P.O. BOX 5265
 FRISCO, CO 80443**

DO NOT WRITE IN THIS SPACE



01092006 No Chg-LLC CR2E083 (11/05)

4. FEI Number
20-1988680 Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

**BAVIELLO, JR., MICHAEL A ESQUIRE
 1025 FIFTH AVENUE NORTH
 NAPLES, FL 34102**

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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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**Filing Fee is \$50.00
 Due by May 1, 2006**

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR CRANE, TIMOTHY J P.O. BOX 5265 FRISCO, CO 80443
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR MERRIMAN, GEORGE K PO BOX 10009 BRECKENRIDGE, CO 80424
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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: [Signature] Date: 1/13/06 Daytime Phone #: 970 418 1599

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE