


**2005 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**  
**Apr 12, 2005 8:00 am**  
**Secretary of State**

04-12-2005 90019 036 \*\*\*\*50.00

<b>DOCUMENT # L04000092456</b>	
1. Entity Name SIX BY THE SEA, LLC	

Principal Place of Business 11106 WATER LILY WAY BRADENTON, FL 34202 US	Mailing Address 11106 WATER LILY WAY BRADENTON, FL 34202 US
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**20029715**



2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.

04062005 Chg-LLC CR2E083 (10/03)

City & State	City & State
Zip	Country

4. FEI Number <b>20-2078401</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required

6. Name and Address of Current Registered Agent	
HUARTSON, THOMAS R 11106 WATER LILY WAY BRADENTON, FL 34202	

7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	FL Zip Code

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**Filing Fee is \$50.00**  
**Due by May 1, 2005**

**Make check payable to**  
**Florida Department of State**

9. MANAGING MEMBERS / MANAGERS		10. ADDITIONS / CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRMEMBER AUGENSTEIN, DONALD J 11106 WATER LILY WAY BRADENTON, FL 34202 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM HUARTSON, THOMAS R 11106 WATER LILY WAY BRADENTON, FL 34202 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM LACICH, CHRISTOPHER P 11106 WATER LILY WAY BRADENTON, FL 34202 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM HUARTSON, TONI ANN 11106 WATER LILY WAY BRADENTON, FL 34202 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM AUGENSTEIN, SHIRLEY M 11106 WATER LILY WAY BRADENTON, FL 34202 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM LACICH, NANCY L 11106 WATER LILY WAY BRADENTON, FL 34202 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

11. I hereby certify that the information supplied with this filing does not qualify 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 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:  CHRISTOPHER P. LACICH 4/6/05  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone # (330) 744-5211