## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

## DOCUMENT # L04000092542

1. Entity Name

INLAND SEAS APARTMENTS, LLC



Principal Place of Business

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF

Mailing Address

21301 POWERLINE ROAD, SUITE 312 BOCA RATON, FL 33433 P.O. BOX 11229 KNOXVILLE, TN 37939

## FILED Apr 10, 2006 8:00 am Secretary of State

04-10-2006 90049 024 \*\*\*\*50.00



01122006 No Chg-LLC

CR2E083 (11/05)

4. FEI Number	Applied For
22-2174662	Not Applicable
5. Certificate of Status Desired	\$5.00 Additional Fee Required

2 28 06 (212) 880-0511

6. Name and Address of Current Registered Agent

BLALOCK, WALTERS, HELD & JOHNSON, P.A. 802 11TH STREET WEST BRADENTON, FL 34205

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	named entity submits this statement for the purpose of chanions of registered agent.	ging its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept
SIGNATURE	Signature, typed or printed name of registered agent and title if applicable.	(NOTE: Registered Agent signature required when reinstating) DATE
Fi D	lling Fee is \$50.00 ue by May 1, 2006	
9.	MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY+ST-ZIP	MGR INLAND SEAS CORPORATE, INC. 21301 POWERLINE ROAD, SUITE 312 BOCA RATON, FL 33433	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
11. I hereby indicated	t on this report is true and accurate and that my signature s	qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information hall have the same legal effect as if made under cath; that I am a managing member or manager of the safe that it is neglet at the country for a Florida Statutes.

Thomas Schwartz, President

ANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE