

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000031984

Entity Name: SEA SHELLS #31, LLC

FILED  
Jan 04, 2007  
Secretary of State

**Current Principal Place of Business:**

2840 WEST GULF DRIVE  
SANIBEL, FL 33957

**New Principal Place of Business:**

**Current Mailing Address:**

9850 E 30TH STREET  
INDIANAPOLIS, IN 46229

**New Mailing Address:**

FEI Number: 20-2697800

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

URKOVICH, RON  
2323 WOOSTER LANE, UNIT 3  
SANIBEL, FL 33957 US

**Name and Address of New Registered Agent:**

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:

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: SAW CAPITAL PARTNERS, , INC.  
Address: 9850 E 30TH STREET  
City-St-Zip: INDIANAPOLIS, IN 46229

Title: MGRM ( ) Delete  
Name: VELLIGAN, GREG  
Address: 3716 COQUINA DRIVE  
City-St-Zip: SANIBEL, FL 33957

Title: MGRM ( ) Delete  
Name: VELLIGAN, CHRIS  
Address: 7458 DEER TRACK DRIVE  
City-St-Zip: DENVER, NC

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: SCOTT J. WEAVER

MM

01/04/2007

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