

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000037215

Entity Name: SEASIDE 50, LLC

FILED  
Apr 24, 2008  
Secretary of State

**Current Principal Place of Business:**

761 GLEN ABBEY WAY  
MELBOURNE, FL 32940 US

**New Principal Place of Business:**

**Current Mailing Address:**

761 GLEN ABBEY WAY  
MELBOURNE, FL 32940 US

**New Mailing Address:**

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired ( )

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

COLEMAN, CHRISTOPHER J ESQUIRE  
1311 BEDFORD DRIVE  
MELBOURNE, FL 32940 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: MILLS, LAURA  
Address: 761 GLEN ABBEY WAY  
City-St-Zip: MELBOURNE, FL 32940 US

Title: MGRM ( ) Delete  
Name: WATSON, KATHLEEN  
Address: 761 GLEN ABBEY WAY  
City-St-Zip: MELBOURNE, FL 32940 US

**ADDITIONS/CHANGES:**

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 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: KATHLEEN WATSON

MGRM

04/24/2008

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