

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000038597

FILED
Jan 14, 2008
Secretary of State

Entity Name: ACTION SEA HOLDINGS, LLC

Current Principal Place of Business:

205 BRIGHTWATER DRIVE, # 402
CLEARWATER BEACH, FL 33767

New Principal Place of Business:

Current Mailing Address:

PO BOX 3725
CLEARWATER BEACH, FL 33767

New Mailing Address:

205 BRIGHTWATER DRIVE # 402
CLEARWATER BEACH, FL 33767

FEI Number: 20-2727835

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MILLER, LAURENCE J
205 BRIGHTWATER DRIVE # 402
CLEARWATER BEACH, FL 33767 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: MILLER, LAURENCE J
Address: PO BOX 3725
City-St-Zip: CLEARWATER BEACH, FL 33767

Title: MGRM () Delete
Name: MILLER, BARBARA S
Address: PO BOX 3725
City-St-Zip: CLEARWATER BEACH, FL 33767

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: MILLER, LAURENCE J
Address: 205 BRIGHTWATER DRIVE # 402
City-St-Zip: CLEARWATER BEACH, FL 33767

Title: MGRM (X) Change () Addition
Name: MILLER, BARBARA S
Address: 205 BRIGHTWATER DRIVE # 402
City-St-Zip: CLEARWATER BEACH, FL 33767

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: LAURENCE J MILLER

MGRM

01/14/2008

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