

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 10, 2008
Secretary of State

DOCUMENT# L05000043010

Entity Name: SEAGROVE HP, LLC

Current Principal Place of Business:

353 WILDERNESS WAY
SANTA ROSA BEACH, FL 32459

New Principal Place of Business:

143 WEST WATER STREET
ROSEMARY BEACH, FL 32461

Current Mailing Address:

P. O. BOX 4910
SANTA ROSA BEACH, FL 32459

New Mailing Address:

FEI Number: 20-2879842 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HELFAND, RICHARD
353 WILDERNESS WAY
SANTA ROSA BEACH, FL 32459 US

Name and Address of New Registered Agent:

HELFAND, RICHARD
143 WEST WATER STREET
ROSEMARY BEACH, FL 32461 US

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: _____ 02/10/2008
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: HELFAND, RICHARD
Address: P. O. BOX 4910
City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: MGRM () Delete
Name: HELFAND, JAN
Address: P. O. BOX 4910
City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: MGRM () Delete
Name: POTTER, WILLIAM J
Address: 249 N. BLUE HERON DRIVE
City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: MGRM () Delete
Name: POTTER, CATHERINE K
Address: 249 N. BLUE HERON DRIVE
City-St-Zip: SANTA ROSA BEACH, FL 32459

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:

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: RICHARD HELFAND MGRM 02/10/2008
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date