

# 2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000043010

Entity Name: SEAGROVE HP, LLC

FILED  
Feb 14, 2010  
Secretary of State

**Current Principal Place of Business:**

143 WEST WATER STREET  
ROSEMARY BEACH, FL 32461

**New Principal Place of Business:**

**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  
143 WEST WATER STREET  
ROSEMARY BEACH, FL 32461      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  
Name: HELFAND, RICHARD  
Address: P. O. BOX 4910  
City-St-Zip: SANTA ROSA BEACH, FL 32459

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

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

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

I hereby 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

02/14/2010

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