

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000071235

Entity Name: SEACOAST106 LLC

FILED
Apr 29, 2009
Secretary of State

Current Principal Place of Business:

4155 SOUTH ATLANTIC AVE
106
NEW SMYRNA BEACH, FL 32169

New Principal Place of Business:

Current Mailing Address:

214 WAYMOUTH HARBOR COVE
LONGWOOD, FL 32779

New Mailing Address:

FEI Number: 20-3174321

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

NEWELL, JAY
214 WAYMOUTH HARBOR COVE
LONGWOOD, FL 32779 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: MGR () Delete
Name: NEWELL, ROBIN
Address: 214 WAYMOUTH HARBOR COVE
City-St-Zip: LONGWOOD, FL 32779

Title: MGR () Delete
Name: MORRISON, KATHLEEN
Address: 200 SHADOW BAY BLVD
City-St-Zip: LONGWOOD, FL 32779

Title: MGR () Delete
Name: DEWAR, ROBERTA
Address: 3740 STRUBLE ROAD
City-St-Zip: ENDICOTT, NY 13760

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 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: ROBIN NEWELL

MGR

04/29/2009

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