

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000075515

FILED
Feb 20, 2009
Secretary of State

Entity Name: SEACREST PROPERTY, LLC

Current Principal Place of Business:

5151 SOUTH LAKELAND DRIVE
LAKELAND, FL 33807

New Principal Place of Business:

5151 SOUTH LAKELAND DRIVE
LAKELAND, FL 33813

Current Mailing Address:

PO BOX 7266
LAKELAND, FL 33807

New Mailing Address:

FEI Number: 20-3174031 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LASMAN, JEFFREY M
C/O LASMAN LAW FIRM, P.A.
6152 DELANCEY STATION STREET, SUITE 205
RIVERVIEW, FL 33569 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: OLIVERA, FELIPE L
Address: 5151 SOUTH LAKELAND DRIVE
City-St-Zip: LAKELAND, FL 33813

Title: MGRM () Delete
Name: OLIVERA, MAGDALINE M
Address: 5151 SOUTH LAKELAND DRIVE
City-St-Zip: LAKELAND, FL 33813

Title: MGRM () Delete
Name: STANGL, ALEJANDRO R
Address: 5151 SOUTH LAKELAND DRIVE
City-St-Zip: LAKELAND, FL 33813

Title: MGRM () Delete
Name: STANGL, ALICIA E
Address: 5151 SOUTH LAKELAND DRIVE
City-St-Zip: LAKELAND, FL 33813

Title: MGRM () Delete
Name: OLIVERA, FELIPE J
Address: 6739 CRECENT LAKE DRIVE
City-St-Zip: LAKELAND, FL 33813

Title: MGRM () Delete
Name: OLIVERA, ALICIA M
Address: 6739 CRECENT LAKE DRIVE
City-St-Zip: LAKELAND, FL 33813

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
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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: ALICIA E. STANGL

MGRM

02/20/2009

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