

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000082884

Entity Name: SEA & SEA PARTNERS, LLC

FILED
May 11, 2006
Secretary of State

Current Principal Place of Business:

3500 GALT OCEAN DRIVE
UNIT 317
FORT LAUDERDALE, FL 33308

New Principal Place of Business:

Current Mailing Address:

3500 GALT OCEAN DRIVE
UNIT 317
FORT LAUDERDALE, FL 33308

New Mailing Address:

3309 HIDDEN SPRINGS LANE
LOUISVILLE, KY 40059

FEI Number: 20-3341006 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

DANIEL L. OSBORNE, P.A.
315 5TH STREET
WEST PALM BEACH, FL 33401 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: OSBORNE, CHRISTOPHER A
Address: 3500 GALT OCEAN DRIVE, UNIT 317
City-St-Zip: FORT LAUDERDALE, FL 33308

Title: MGRM () Delete
Name: BAKER, CARL
Address: 3500 GALT OCEAN DRIVE, UNIT 317
City-St-Zip: FORT LAUDERDALE, FL 33308

ADDITIONS/CHANGES:

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 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: CARL D. BAKER

MGRM

05/11/2006

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