

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000085155

Entity Name: SEACOAST GROUP, LLC

**FILED**  
**Mar 17, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

50 NORTH LAURA ST.  
STE. 150  
JACKSONVILLE, FL 32202

**New Principal Place of Business:**

9 EASTMOOR LN  
PALM COAST, FL 32164

**Current Mailing Address:**

P.O.BOX 16786  
JACKSONVILLE, FL 32245

**New Mailing Address:**

9 EASTMOOR LN  
PALM COAST, FL 32164

FEI Number: 06-1756045

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

MROCHKO, TARAS  
13364 BEACH BLVD  
933  
JACKSONVILLE, FL 32224 US

**Name and Address of New Registered Agent:**

MROCHKO, TARAS  
9 EASTMOOR LN  
PALM COAST, FL 32164 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: TARAS MROCHKO

03/17/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: MROCHKO, TARAS  
Address: 9 EASTMOOR LN  
City-St-Zip: PALM COAST, FL 32164

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: TARAS MROCHKO

MGRM

03/17/2010

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