## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L06000041578

Entity Name: SEACOAST CONSTRUCTION FT. MYERS, LLC

( ) Delete

RJG VENTURÉS. INC.

1460 BARACOA AVE

CORAL GABLES, FL 33146

Name:

Address:

City-St-Zip:

FILED Apr 28, 2009 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:		
169 EAST FLAGLER STREET, SUITE 1123 MIAMI, FL 33131			405	2103 CORAL WAY 405 MIAMI, FL 33145		
Current Mailing Address:			New Mail	New Mailing Address:		
169 EAST FLAGLER STREET, SUITE 1123 MIAMI, FL 33131			405	2103 CORAL WAY 405 MIAMI, FL 33145		
FEI Number:	20-5079666	FEI Number Applied For ( )	FEI Number Not App	plicable ( ) Certificate of Status Desired (X)		
Name and	Address of (	Current Registered Agent:	Name and	d Address of New Registered Agent:		
	ECOND STRE	OF FLORIDA, LLC EET, SUITE 2900				
The above in the State		submits this statement for the p	urpose of changing	its registered office or registered agent, or both,		
SIGNATUR	RE:					
	Electron	nic Signature of Registered Age	nt	Date		
MANAGING MEMBERS/MANAGERS:			ADDITIONS	ADDITIONS/CHANGES:		
Title: Name: Address: City-St-Zip:	,		Title: Name: Address: City-St-Zip:	MGRM (X) Change ( ) Addition SEACOAST CONSTRUCTION, INC. 2103 CORAL WAY MIAMI, FL 33145		
Title: Name: Address: City-St-Zip:	MGR ( ABADIE HOLD 650 RAVEN MIAMI SPRING		Title: Name: Address: City-St-Zip:	()Change ()Addition		
Title: Name: Address: City-St-Zip:	MGR ( ELLA HOLDING 8819 CARLYLE SURFSIDE, FL	EAVE	Title: Name: Address: City-St-Zip:	()Change ()Addition		
Title: Name: Address: City-St-Zip:	MGR ( OLD FLORIDA 11877 SANDLA BOCA RATON,	KE DR	Title: Name: Address: City-St-Zip:	()Change ()Addition		
Title: Name: Address: City-St-Zip:	MGR ( MDH PROPER 11803 NE 11TI BISCAYNE PAI	1 PLACE	Title: Name: Address: City-St-Zip:	()Change ()Addition		

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.

Title:

Name:

Address:

City-St-Zip:

() Change () Addition

SIGNATURE: GEORGE ABADIE **MGRM** 04/28/2009