

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000113767

**FILED**  
**Feb 27, 2010**  
**Secretary of State**

**Entity Name:** DAVE AND GERI SEASIDE, L.L.C.

**Current Principal Place of Business:**

4153 S. ATLANTIC AVE.  
#204  
NEW SMYRNA BEACH, FL 32169

**New Principal Place of Business:**

**Current Mailing Address:**

48676 PINEHILL DR  
PLYMOUTH, MI 48170

**New Mailing Address:**

**FEI Number:**                      **FEI Number Applied For ( )**                      **FEI Number Not Applicable (X)**                      **Certificate of Status Desired ( )**

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

ALDRICH, GERALDINE A TRUSTEE  
4153 S. ATLANTIC AVE.  
#204  
NEW SMYRNA BEACH, FL 32169 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  
Name: ALDRICH, GERALDINE A  
Address: 4153 S. ATLANTIC AVE. #204  
City-St-Zip: NEW SMYRNA BEACH, FL 32169

Title: MGR  
Name: ALDRICH, DAVID A  
Address: 4155 SOUTH ATLANTIC AVE SUITE #204  
City-St-Zip: NEW SMYRNA BEACH, FL 32169

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: DAVID A ALDRICH

MGR

02/27/2010

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