

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000116157

Entity Name: SEOENG LLC.

FILED
Mar 11, 2008
Secretary of State

Current Principal Place of Business:

15110 SUNDIAL PL
BRADENTON, FL 34202

New Principal Place of Business:

Current Mailing Address:

15110 SUNDIAL PL
BRADENTON, FL 34202

New Mailing Address:

FEI Number: 74-3196075

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FINK, JAMES C
15110 SUNDIAL PL
BRADENTON, FL 34202 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 () Delete
Name: FINK, JAMES C
Address: 15110 SUNDIAL PL
City-St-Zip: BRADENTON, FL 34202

Title: MGR () Delete
Name: STOUFFER, SCOTT A
Address: 15111 SUNDIAL PL
City-St-Zip: BRADENTON, FL 34202

Title: MGR () Delete
Name: STOUFFER, MAURA D
Address: 15111 SUNDIAL PL
City-St-Zip: BRADENTON, FL 34202

Title: MGR () Delete
Name: FINK, JENNIFER A
Address: 15110 SUNDIAL PL
City-St-Zip: BRADENTON, FL 34202

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
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: JAMES C FINK

MGR

03/11/2008

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