## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L07000021505

1083 TREE POINT DRIVE

City-St-Zip: FORT WALTONBEACH, FL 32547 US

Address:

Entity Name: SE-P LLC

FILED Jan 05, 2008 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:	
	ORE DRIVE R, FL 32579	US		
Current Mailing Address:			New Mailing Address:	
17 BAYSHORE DRIVE SHALIMAR, FL 32579		US		
FEI Number	:	FEI Number Applied For (X)	FEI Number Not Applicable ( )	Certificate of Status Desired ( )
Name and	Address of	Current Registered Agent:	Name and Address	of New Registered Agent:
17 BAYSH	ER, LESLIE R IORE DRIVE R, FL 32579	US		
	named entity e of Florida.	submits this statement for the p	ourpose of changing its registere	ed office or registered agent, or both
SIGNATUI	RE:			
	Electro	nic Signature of Registered Age	ent	Date
MANAGING MEMBERS/MANAGERS:			ADDITIONS/CHANGES:	
Title: Name: Address: City-St-Zip:	MGRM ( FLEISCHER, I 17 BAYSHORI SHALIMAR, FI	E DRIVE	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	MGRM ( FLEISCHER, I 17 BAYSHORI SHALIMAR, FI	E DRIVE	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition
Title: Name: Address: City-St-Zip:	NELSON, DAN 1083 TREE PO		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition
Title: Name:	MGRM ( NELSON, BAR	) Delete BARA A	Title: Name:	( ) 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.

Address:

City-St-Zip:

SIGNATURE: LESLIE FLEISCHER MGR 01/05/2008