2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000105917

City-St-Zip: FORT WALTON BEACH, FL 32548 US

Entity Name: SEA-SIDE BOOKKEEPING SERVICES, LLC

FILED May 01, 2008 Secretary of State

| Current Principal Place of Business: | | | New Principal Pla | New Principal Place of Business: | |
|---|---|-------------------|--|--|--|
| | OLLYWOOD BLVD LTON BEACH, FL 32548 | US | | | |
| Current Mailing Address: | | | New Mailing Add | New Mailing Address: | |
| | OLLYWOOD BLVD LTON BEACH, FL 32548 | US | | | |
| | | - | FEI Number Not Applicable() company did not receive the prior no Name and Addres | | |
| | NITA D RINEAU PARK SCHOOL R FL 32577 US | D | | | |
| | named entity submits this set of Florida. | statement for the | e purpose of changing its regist | ered office or registered agent, or both | |
| SIGNATU | RE: | | | | |
| | Electronic Signature | of Registered A | ngent | Date | |
| MANAGING MEMBERS/MANAGERS: | | | ADDITIONS/CHANGES | ADDITIONS/CHANGES: | |
| Title: Name: Address: City-St-Zip: | MGR () Delete WARR, ANITA D 5251 BARRINEAU PARK SCHO MOLINO, FL 32577 US | OOL RD | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: City-St-Zip: | MGRM () Delete FOWLER, LARRY W 724 SAILFISH DRIVE FORT WALTON BEACH, FL 3: | 2548 US | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: | MGRM () Delete FOWLER, DEBRA B 724 SAILFISH DRIVE | | Title: Name: Address: | () 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.

City-St-Zip:

SIGNATURE: ANITA WARR 05/01/2008