

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Mar 10, 2008 8:00 am
Secretary of State

01-22-2008 90117 019 ***138.75

DOCUMENT # L98000001779

1. Entity Name
FLORIDA SEABREEZE, L.L.C.



Principal Place of Business
**3951-56TH AVENUE NORTH
ST. PETERSBURG, FL 33714**

Mailing Address
**3951-56TH AVENUE NORTH
ST. PETERSBURG, FL 33714**



01072008 No Chg-LLC

CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3532024

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **\$5.00** Additional
Fee Required

6. Name and Address of Current Registered Agent

**KURTZ, MICHAEL W
3951-56TH AVENUE NORTH
ST. PETERSBURG, FL 33714**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE **Michael W Kurtz**
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reappointing)

DATE **3/15/08**

**FILE NOW!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75**

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
**MGRM
KURTZ, MICHAEL W
3951-56TH AVENUE NORTH
ST. PETERSBURG, FL 33714**

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: **Michael W. Kurtz** **3/5/08 727-521-0366**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNER (MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE)

Date

Daytime Phone #