## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

## **DOCUMENT # M04000004907**

1. Entity Name SEA SHELTER V, LLC



FILED Jan 12, 2007 08:00 AM Secretary of State

Principal Place of Business

Mailing Address

1000 WILLIAM HILTON PARKWAY, SUITE 101 HILTON HEAD ISLAND, SC 29928 1000 WILLIAM HILTON PARKWAY, SUITE 101 HILTON HEAD ISLAND, SC 29928



01092007No Chg-LLC

CR2E083 (11/05)

, FEI Number	 Applied For
42-1647368	Not Applicable
. Certificate of Status Desired	\$5.00 Additional

6. Name and Address of Current Registered Agent

ANDREW D. TARR, ESQUIRE 305 W. HALLANDALE BEACH BLVD HALLANDALE BEACH, FL 33009

SIGNATURE:

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING MA

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	named entity submits this statement for the purpose of changions of registered agent.	ing its registered office or registered agent, or bo	oth, in the State of Florida. I am familiar with, and accept	
SIGNATURE.	Signature, typed or printed name of registered agent and title if applicable	(NOTE: Registered Agent agreature required when reinstating)	DATE	
Fi D	iling Fee Is \$50.00 ue by May 1, 2007			
9.	MANAGING MEMBERS/MANAGERS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR CAPITAL ADVANTAGE FINANCE AND DEVELOPME 1000 WILLIAM HILTON PARKWAY, SUITE 101 HILTON HEAD ISLAND, SC 29928	ENT	U00000584634 01/12/07-80045-008 50.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
TITLE NAME STREET ADDRESS CITY-ST-ZP		DO	NOT WRITE	
TITLE NAME STREET ADDRESS CITY-SI-ZIP		IN '	THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
11. I hereby certify that the information supplied with this filing does not charled for the experiptions 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				

ITHERIZED REPRESENTATIVE