2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

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DOCUMENT # M06000000573

1. Entity Name
SEA SHELTER IX, LLC



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

Principal Place of Business

siness Mailing Address

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



01092007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 20-4091658 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional

6. Name and Address of Current Registered Agent

TARR, ANDREW D 305 WEST HALLANDLAE BEACH BLVD. HALLANDALE BEACH, FL 33009

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The above named entity submits this statement for the purpose of change the obligations of registered agent.	ing its registered office or registered agent, or bo	kh, in the State of Florida. I am familiar with, and accept
SIGNATURE	(NOTE: Flegistered Agent agneture required when reinstating)	DATE

Filing Fee is \$50.00 Due by May 1, 2007

9.	MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR CAPITAL ADVANTAGE FINANCE AND DEVELOPMENT 1000 WILLIAM HILTON PARKWAY, SUITE 101 HILTON HEAD ISLAND, SC 29928	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
NAME STREET ADDRESS CITY-ST-ZIP		
11. I hereby certify that the information supplied with this filing does not qualify for the e		

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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 additional declarate 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 repeture or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR AUTH

1/9/07

943 185 5559

Daytime Phone #