2007 FOR PROFIT CORPORATION

ANNUAL REPORT

May 03, 2007 8:00 am Secretary of State **DOCUMENT # P02000124023** 05-03-2007 90030 005 ***150.00 1. Entity Name SEACOAST ENTERPRISES, INC. 40102396 Principal Place of Business Mailing Address 800 W. CYPRESS CREEK RD., STE 470 800 W. CYPRESS CREEK RD., STE 470 FORT LAUDERDALE, FL 33309 FORT LAUDERDALE, FL 33309 2. Principal Place of Business - No P.O. Box # 3. Mailing Address 800 W. CYPRESS CREEK RD. 800 W. CYPRESS CREEK RD. Suite, Apt. #, etc. Suite, Apt. #, etc. Chg-P 04262007 CR2E034 (12/06) SUITE 465 SUITE 465 Applied For 4. FEI Number City & State City & State 54-2085899 Not Applicable FORT LAUDERDALE, FL FORT LAUDERDALE, FL Zip \$8.75 Additional 5. Certificate of Status Desired 33309 USA 33309 Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent LEGEL, LARRY Street Address (P.O. Box Number is Not Acceptable) 800 W. CYPRESS CREEK RD., STE 470 FORT LAUDERDALE, FL 33309 City Zip Code FL 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. PSDT TITLE Delete TITLE Change ☐ Addition GRIBBEN, ALLAN R III NAME NAME STREET ADDRESS 800 W. CYPRESS CREEK RD., STE 470 STREET ADDRESS CITY-ST-ZIP FORT LAUDERDALE, FL 33309 CITY-ST-ZIP DVP ☐ Change TITLE Delete TITLE Addition GRIBBEN, HELEN NAME NAME STREET ADDRESS 800 W. CYPRESS CREEK RD., STE 470 STREET ADDRESS CITY-ST-ZIP FORT LAUDERDALE, FL 33309 CITY-ST-ZIE ☐ Change AS Delete TITI F ☐ Addition TITLE LEGEL, LARRY NAME NAME 800 W. CYPRESS CREEK RD., STE 470 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP FORT LAUDERDALE, FL 33309 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete ☐ Channe ☐ Addition TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-71P CITY-ST-ZIP TITLE ☐ Delete TITLE Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

12. 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 or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTE FFICER OR DIRECTOR

Date Daytime Phone #

FILED