### 2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

#### DOCUMENT# L07000049655

Entity Name: SEAGIS FLCC LLC

#### **Current Principal Place of Business:**

C/O SEAGIS PROPERTY GROUP 100 FRONT STREET, SUITE 350 WEST CONSHOHOCKEN, PA 19428

## **Current Mailing Address:**

C/O SEAGIS PROPERTY GROUP 100 FRONT STREET, SUITE 350 WEST CONSHOHOCKEN, PA 19428

## FEI Number: 26-0215182

#### Name and Address of Current Registered Agent:

FRAU, MINDY 11340 INTERCHANGE CIRCLE NORTH C/O SEAGIS PROPERTY GROUP LP MIRAMAR, FL 33025 US

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.

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|-------------------------------|--|-----------------|-----------------------------|
| SIGNATURE                     | : MINDY FRAU                             |                 | 02/04/2014                  |
|                               | Electronic Signature of Registered Agent |                 | Date                        |
| Authorized Person(s) Detail : |  |                 |                             |
| Title                         | Ρ  | Title           | ST                          |
| Name                          | BEGIER, JOHN                             | Name            | MOYER, KENNETH              |
| Address                       | 100 FRONT STREET, SUITE 350              | Address         | 100 FRONT STREET, SUITE 350 |
| City-State-Zip:               | WEST CONSHOHOCKEN PA 19428               | City-State-Zip: | WEST CONSHOHOCKEN PA 19428  |
| Title                         | V  | Title           | MGR                         |
| Name                          | LEE, CHARLES                             | Name            | MCKENNA, TIMOTHY E          |
| Address                       | 100 FRONT STREET, SUITE 350              | Address         | 100 FRONT STREET, SUITE 350 |
| City-State-Zip:               | WEST CONSHOHOCKEN PA 19428               | City-State-Zip: | WEST CONSHOHOCKEN PA 19428  |

I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

CFO

#### SIGNATURE: TIMOTHY E MCKENNA

Electronic Signature of Signing Authorized Person(s) Detail

# FILED Feb 04, 2014 Secretary of State CC9433154364

Certificate of Status Desired: No

Date

02/04/2014