

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000101625

**Entity Name:** SEAWOLFE, LLC

**Current Principal Place of Business:**

19 FAIRBANKS DRIVE  
CLEARWATER, FL 33764

**Current Mailing Address:**

PO BOX 2924  
CLEARWATER, FL 33757

**FEI Number:** 46-2332746

**Certificate of Status Desired:** No

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

WOLFE, JOE R  
5323 BOARDWALK S ST.  
HOLIDAY, FL 34690 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.*

**SIGNATURE:** JOE R. WOLFE

04/25/2014

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title	MGR	Title	MGR
Name	WOLFE, JOE R	Name	STEWART, ROBERT
Address	PO BOX 2924	Address	19 FAIRBANKS DRIVE
City-State-Zip:	CLEARWATER FL 33764	City-State-Zip:	CLEARWATER FL 33764

*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.*

**SIGNATURE:** MR. JOE RAWLS WOLFE

MANAGER

04/25/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date