

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000070174

**Entity Name:** SOUTHEASTERN INVESTMENT PCB, LLC

**Current Principal Place of Business:**

113 BAYBRIDGE DRIVE  
GULF BREEZE, FL 32561

**Current Mailing Address:**

113 BAYBRIDGE DRIVE  
GULF BREEZE, FL 32561 US

**FEI Number:** 47-3254438

**Certificate of Status Desired:** No

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

BEGGS & LANE,A REGISTERED LLP  
501 COMMENDENCIA STREET  
PENSACOLA, FL 32502 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Authorized Person(s) Detail :**

Title MEM  
Name INNISFREE HOTELS, INC  
Address 113 BAYBRIDGE DRIVE  
City-State-Zip: GULF BREEZE FL 32561

Title MEM  
Name MACQUEEN, JULIAN B  
Address 113 BAYBRIDGE DRIVE  
City-State-Zip: GULF BREEZE FL 32561

Title MGR  
Name INNISFREE HOTELS, INC  
Address 113 BAYBRIDGE DRIVE  
City-State-Zip: GULF BREEZE FL 32561

Title CFO, AUTHORIZED REPRESENTATIVE  
Name MOORE, S BROOKS  
Address 113 BAYBRIDGE DRIVE  
City-State-Zip: GULF BREEZE FL 32561

*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:** JULIAN MACQUEEN

MEM

02/14/2017

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date