


2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 15, 2004 08:00 AM
Secretary of State

DOCUMENT # L01000001631

1. Entity Name
SUNSHINE RECYCLING SERVICES OF S.W. FLORIDA, L.L.C.



Principal Place of Business Mailing Address

20681 FRUITFUL DRIVE 20681 FRUITFUL DRIVE
 ESTERO, FL 33928 ESTERO, FL 33928

DO NOT WRITE IN THIS SPACE



03302004 No Chg-LLC CR2E083 (10/03)

4. FEI Number Applied For
 65-1073042 Not Applicable

5. Certificate of Status Desired **\$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

AMUNDSEN, NICK R
 20681 FRUITFUL DRIVE
 ESTERO, FL 33928

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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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$50.00 Due by May 1, 2004

U00000114822 *A.H.*
 04/15/04-80065-022 50.00

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM AMUNDSEN, RORY P 20681 FRUITFUL DRIVE ESTERO, FL 33928
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM AMUNDSEN, NICK R 20681 FRUITFUL DRIVE ESTERO, FL 33928
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	

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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report is true and accurate 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 receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: *Rory Amundsen* *4-17-04* *239-390 9529*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #