2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000027518

Name:

Address:

City-St-Zip:

Entity Name: SUNTRUST AMERICA, LLC

FILED Jul 06, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 3200 UNIVERSITY DRIVE 1 SOUTH OCEAN BLVD 202 212 CORAL SPRINGS, FL 33065 US BOCA RATON, FL 33432 US **Current Mailing Address: New Mailing Address:** 3200 UNIVERSITY DR 1 SOUTH OCEAN BLVD CORAL SPRINGS, FL 33076 US BOCA RATON, FL 33432 US FEI Number: 11-3662359 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of New Registered Agent: Name and Address of Current Registered Agent: GONZALEZ, IRIS J GONZALEZ, IRIS J 1 SOUTH OCEAN BLVD. 3200 UNIVERSITY DRIVE CORAL SPRINGS, FL 33065 US BOCA RATON, FL 33470 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: 07/06/2004 Electronic Signature of Registered Agent Date **MANAGING MEMBERS/MEMBERS:** ADDITIONS/CHANGES: MGRM (X) Change () Addition () Delete GONZALEZ, IRIS J GONZALEZ, JEANNETTE I PRES Name: Name: 3200 UNIVERSITY DR #202 Address: 1 SOUTH OCEAN BLVD. #212 Address: City-St-Zip: CORAL SPRINGS, FL 33065 US City-St-Zip: BOCA RATON, FL 33432 US Title: Title: MGRM () Change (X) Addition () Delete Name: NORMAN, BRETT J CEO Name: Address: Address: 1 SOUTH OCEAN BLVD. #212 City-St-Zip: City-St-Zip: BOCA RATON, FL 33432 US Title: () Delete Title: MGR () Change (X) Addition MEDINA, DAMARIS L VP Name: Name: 1 SOUTH OCEAN BLVD. #212 Address: Address: City-St-Zip: City-St-Zip: BOCA RATON, FL 33432 Title: () Delete Title: MGR () Change (X) Addition GONZALEZ, DIONISIO A CEO Name: Name: 1 SOUTH OCEAN BLVD. #212 Address: Address: BOCA RATON, FL 33432 FL City-St-Zip: City-St-Zip: Title: () Delete Title: () Change (X) Addition

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this 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 608, Florida Statutes.

Name:

Address:

City-St-Zip:

VARGAS, LINNETTE S MGR

1 SOUTH OCEAN BLVD. #212

07/06/2004

BOCA RATON, FL 33432 US

SIGNATURE: JEANNETTE I. GONZALEZ PRES