

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000060465

FILED  
Apr 11, 2007  
Secretary of State

Entity Name: SUNTONE DEVELOPMENT GROUP, LLC

## Current Principal Place of Business:

614 E NEW HAVEN AVENUE  
MELBOURNE, FL 32901

## New Principal Place of Business:

2115 PALM BAY ROAD NE  
SUITE 3E  
PALM BAY, FL 32905

## Current Mailing Address:

614 E NEW HAVEN AVENUE  
MELBOURNE, FL 32901

## New Mailing Address:

2115 PALM BAY ROAD NE  
SUITE 3E  
PALM BAY, FL 32905

FEI Number: 20-3018143

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SHEIN, DAVID E  
1300 W EAU GALLIE BLVD  
MELBOURNE, FL 32935 US

## Name and Address of New Registered Agent:

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

## MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete  
Name: MASON, ANTHONY  
Address: 614 E NEW HAVEN AVE  
City-St-Zip: MELBOURNE, FL 32901

Title: MGRM ( ) Delete  
Name: HANDA, SUNDEEP  
Address: 614 E NEW HAVEN AVE  
City-St-Zip: MELBOURNE, FL 32901

## ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MGRM (X) Change ( ) Addition  
Name: HANDA, SUNDEEP  
Address: 2115 PALM BAY ROAD NE SUITE 3E  
City-St-Zip: PALM BAY, FL 32905

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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.

SIGNATURE: SUNDEEP HANDA

MGRM

04/11/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date