

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000091433

FILED
Apr 21, 2010
Secretary of State

Entity Name: SUNRISE ON THE ST. JOHNS, LLC

Current Principal Place of Business:

501 ST. JOHNS AVE.
PALATKA, FL 32177

New Principal Place of Business:

Current Mailing Address:

501 ST. JOHNS AVE.
PALATKA, FL 32177

New Mailing Address:

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CLARK, RONALD E ESQUIRE
501 ST. JOHNS AVE.
PALATKA, FL 32177 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: MGR
Name: WILLIAMS, JOHN M
Address: 5825 GLORIA AVE.
City-St-Zip: ST. AUGUSTINE, FL 32080

Title: P
Name: WILLIAMS, JOHN M
Address: 5825 GLORIA AVE.
City-St-Zip: ST. AUGUSTINE, FL 32080

Title: MGR
Name: JOHN TURNER LIVING TRUST
Address: PO BOX 924
City-St-Zip: PALATKA, FL 32178

Title: ST
Name: JOHN TURNER LIVING TRUST
Address: PO BOX 924
City-St-Zip: PALATKA, FL 32178

I hereby 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: JOHN M WILLIAMS

MGR

04/21/2010

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