

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000061110

FILED
Jul 07, 2009
Secretary of State

Entity Name: SUNNINGHORSE INVESTMENTS, LLC

Current Principal Place of Business:

67 ANGELFISH CAY DRIVE
KEY LARGO, FL 33037

New Principal Place of Business:

Current Mailing Address:

24 DOCKSIDE LANE PMB 77
KEY LARGO, FL 33037

New Mailing Address:

FEI Number: 26-2871581 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

CFRA, LLC
4221 W BOY SCOUT BLVD 10TH FLOOR
TAMPA, FL 336075736 US

Name and Address of New Registered Agent:

CELA ADVISORS
9100 S. DATRAN BLVD.
1500
MIAMI, FL 33156 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: CELA ADVISORS, BY ANA C. HARRIS, MGR

07/07/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGR () Change (X) Addition
Name: MEBANE, CURRIE PRES
Address: 1816 MARGARET AVE
City-St-Zip: ANNAPOLIS, MD 21401

Title: VP () Change (X) Addition
Name: SCHULTZE, ADELAIDE VP
Address: 24 DOCKSIDE LANE, PMB 77
City-St-Zip: KEY LARGO, FL 33037

I hereby certify that the information supplied with this filing does not qualify 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: CURRIE MEBANE, PRESIDENT

MGR

07/07/2009

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