

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000084939

Entity Name: SUNRISE PLASTICS, LLC

FILED  
Jan 12, 2009  
Secretary of State

**Current Principal Place of Business:**

135 WORTH CT NORTH  
W PALM BEACH, FL 33405

**New Principal Place of Business:**

**Current Mailing Address:**

135 WORTH CT NORTH  
W PALM BEACH, FL 33405

**New Mailing Address:**

FEI Number: 20-0789267

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

JAMES N. BROWN, P.A.  
1110 N OLIVE AVE  
W PALM BEACH, FL 33401 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: BROWN, JILL M  
Address: 135 WORTH CT NORTH  
City-St-Zip: W PALM BEACH, FL 33405

Title: MGR ( ) Delete  
Name: BROWN, JAMES N  
Address: 135 WORTH CT NORTH  
City-St-Zip: W PALM BEACH, FL 33405

**ADDITIONS/CHANGES:**

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

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

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: JAMES N. BROWN

MGR

01/12/2009

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