2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L00000012914

1. Entity Name

SUNSET VILLAS OF CHIEFLAND, LLC



Principal Place of Business Mailing Address

516 LAKEVIEW RD., UNIT 8 CLEARWATER, FL 33756-3302 516 LAKEVIEW RD., UNIT 8 CLEARWATER, FL 33756-3302 FILED Feb 24, 2005 08:00 AM Secretary of State



01272005 No Chg-LLC

CR2E083 (10/03)

4. FEI Number		Applied For	
59-3679404		Not Applicable	
5. Certificate of Status Desired	X	\$5.00 Additional Fee Required	

6. Name and Address of Current Registered Agent

FLYNN, THOMAS F. 516 LAKEVIEW RD., UNIT 8 CLEARWATER, FL 33756-3302

SIGNATURE:

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2/16/05

727-449-1182

Daysme Phone #

SIGNATURE.	Signature, typed or printed name of registered agent and title if applicable.	(NOTE: Registered Agent signature required when reinstating)	DATE
	iling Fee is \$50.00 ue by May 1, 2005		
9.	MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM FLYNN, THOMAS F 516 LAKEVIEW RD., #8 CLEARWATER, FL 33756		000000242021 02/24/05-80067-019 55 .00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP FLYNN, KEVIN T 516 LAKEVIEW RD #8 CLEARWATER, FL 33756		
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11. I hereby c indicated limited liab	ertify that the information supplied with this filing does not que on this report is true and accurate and that my signature sha collisty company or the receiver or trustee empowered to execu	nalify for the exemption stated in Section 119.07(3)(if the the same legal effect as if made under oath, te this report as required by Chapter 608. Florida S), Florida Statutes, I further certify that the information that I am a managing member or manager of the tatutes.

Kevin T. Flynn, Vice-President

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE