## 2007 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

## DOCUMENT # L05000055479

802 SUNCOAST, LLC



FILED ..... Jan 12, 2007 08:00 AN **Secretary of State** 

Principal Place of Business 802 16TH AVENUE WEST

PALMETTO, FL 34221

Mailing Address 738 RUGBY ROAD BRYN MAWR, PA 19010

## DO NOT WRITE IN THIS SPACE

01072007 No Chg-LLC	CR2E083 (11/05)

Applied For 4. FEI Number 20-2947862 Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

DRENTLAW, DIANE R 802 16TH AVENUE WEST PALMETTO, FL 34221

the obligations of registered agent.

## DO NOT WRITE IN THIS SPACE

SIGNATURE		E. S.	<u> </u>	1 m 2 m 2 m 2 m 2 m 2 m 2 m 2 m 2 m 2 m		<u>,                                     </u>	
	Signature, typed or printed name of registered agent and title if applicable.	(NOTE, Registered Agent signature required when reinstating)			DATE	<u></u>	<u></u> .
	filing Fee is \$50.00 Due by May 1, 2007		y waa y	<u>.</u>	·		
9.	MANAGING MEMBERS/MANAGERS	·					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM DRENTLAW, DIANE R 738 RUGBY ROAD BRYAN MAWR, PA 19010						
TITLE NAME STREET ADDRESS CITY-ST-ZIP			U00 01/16/	000585 07-800	216 102-01:	2 50.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO	NOT	WR	ITE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN '	THIS	SPA	CE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
TITLE NAME STREET ADDRESS							

8. 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. I am familiar with, and accept

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119. Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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 eceiver or trustee empowered to execute this report as required by Chapter 608. Florida Statutes.

SIGNATURE:

CITY-ST-ZIP

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