

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000012914

FILED
Mar 12, 2009
Secretary of State

Entity Name: SUNSET VILLAS OF CHIEFLAND, LLC

Current Principal Place of Business:

516 LAKEVIEW RD., UNIT 8
CLEARWATER, FL 337563302

New Principal Place of Business:

Current Mailing Address:

516 LAKEVIEW RD., UNIT 8
CLEARWATER, FL 337563302

New Mailing Address:

FEI Number: 59-3679404

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

FLYNN, THOMAS F
516 LAKEVIEW RD., UNIT 8
CLEARWATER, FL 337563302 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: FLYNN, THOMAS F
Address: 516 LAKEVIEW RD., #8
City-St-Zip: CLEARWATER, FL 33756

Title: VP () Delete
Name: FLYNN, KEVIN T
Address: 516 LAKEVIEW RD #8
City-St-Zip: CLEARWATER, FL 33756

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: KEVIN T. FLYNN

VP

03/12/2009

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