

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000026462

**Entity Name:** SUNSHINE RERUN LLC

**Current Principal Place of Business:**

7051 LENCZYK DR  
JACKSONVILLE, FL 32277

**Current Mailing Address:**

PO BOX 17337  
JACKSONVILLE, FL 32245 US

**FEI Number:** 27-5400457

**Certificate of Status Desired:** No

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

CASTILLO DE MEXICO  
7051 LENCZYK DR  
JACKSONVILLE, FL 32277 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:** MICHAEL E. BOSWELL

01/16/2020

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title           MANAGING PARTNER  
Name           BOSWELL, MICHAEL E SR.  
Address        7051 LENCZYK DR  
City-State-Zip: JACKSONVILLE FL 32277

Title           MANAGING PARTNER  
Name           BOSWELL, DANIEL R  
Address        7051 LENCZYK DR  
City-State-Zip: JACKSONVILLE FL 32277

*I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** MICHAEL BOSWELL

MANAGING PARTNER

01/16/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date