

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000095988

**Entity Name:** SUNNY BLUE WATERS, LLC

**Current Principal Place of Business:**

8252 WILTSHIRE DRIVE  
PORT CHARLOTTE, FL 33981

**Current Mailing Address:**

8252 WILTSHIRE DRIVE  
PORT CHARLOTTE, FL 33981

**FEI Number:** 47-3819059

**Certificate of Status Desired:** No

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

GUNDERSON, MIKO P ESQ  
18401 MURDOCK CIRCLE UNIT C  
PORT CHARLOTTE, FL 33948 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title           MANAGER  
Name           DAVIES, KELLY ANNETTE  
Address        8252 WILTSHIRE DRIVE  
City-State-Zip: PORT CHARLOTTE FL 33981

Title           AUTHORIZED MEMBER  
Name           DAVIES, ROBERT LEE  
Address        8252 WILTSHIRE DRIVE  
City-State-Zip: PORT CHARLOTTE FL 33981

Title           AUTHORIZED MEMBER  
Name           BARBER, ROBERT WAYNE  
Address        8252 WILTSHIRE DRIVE  
City-State-Zip: PORT CHARLOTTE FL 33981

Title           AUTHORIZED MEMBER  
Name           BARBER, DEBORAH LYNN  
Address        8252 WILTSHIRE DRIVE  
City-State-Zip: PORT CHARLOTTE FL 33981

*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:** KELLY DAVIES

**MANAGER**

**04/24/2015**

Electronic Signature of Signing Authorized Person(s) Detail

Date