

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000104649

**Entity Name:** SUNSHINE INSURANCE ASSOCIATES, LLC

**Current Principal Place of Business:**

2745 W. HILLSBORO BLVD  
SUITE 1  
DEERFIELD BEACH, FL 33442

**Current Mailing Address:**

2745 W. HILLSBORO BLVD  
SUITE 1  
DEERFIELD BEACH, FL 33442 US

**FEI Number:** 82-1517382

**Certificate of Status Desired:** Yes

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

SWAFFAR, DARLENE  
621 SIESTA KEY CIRCLE  
APARTMENT 3217  
DEERFIELD BEACH, FL 33441 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:** DARLENE SWAFFAR

06/07/2020

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name SWAFFAR, DARLENE  
Address 7774 LA MIRADA DRIVE  
City-State-Zip: BOCA RATON FL 33433

*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:** DARLENE SWAFFAR

OWNER

06/07/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date