2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L00000007991

FILED

01 MAY -7 PM 3:06

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. Entity Name

Sunrise Trading Company, L.L.C.

Principal Place of Business | Mailing Address

2. Principal Place of Business: 13300 Okeechobee Road
Suite, Apt. #, etc.

3. Mailing Address: Same
Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State: Fort Pierce, Florida
Zip: 34945
Country: USA

City & State
Zip
Country

4. FEI Number: [X] Applied For [ ] Not Applicable

5. Certificate of Status Desired [ ] $5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

Peter D. Spyke
13300 Okeechobee Road
Fort Pierce, Florida 34945

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City | FL | Zip Code

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.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

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-06/07/01--01008--018
*****50.00 *****50.00

9. MANAGING MEMBERS / MEMBERS		10. ADDITIONS / CHANGES	
TITLE	Co-Manager [ ] Delete	TITLE	[ ] Change [ ] Addition
NAME	Peter D. Spyke	NAME	
STREET ADDRESS	13300 Okeechobee Road	STREET ADDRESS	
CITY-ST-ZIP	Fort Pierce, Florida 34945	CITY-ST-ZIP	
TITLE	Co-Manager [ ] Delete	TITLE	[ ] Change [ ] Addition
NAME	Rue Lane Brown, Jr.	NAME	
STREET ADDRESS	1030 Grandview Boulevard	STREET ADDRESS	
CITY-ST-ZIP	Fort Pierce, Florida 34982	CITY-ST-ZIP	
TITLE	[ ] Delete	TITLE	[ ] Change [ ] Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	[ ] Delete	TITLE	[ ] Change [ ] Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	[ ] Delete	TITLE	[ ] Change [ ] Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	[ ] Delete	TITLE	[ ] Change [ ] Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

Peter D. Spyke, Co-Manager

SIGNATURE: P. D. Spyke 4/29/01 561-464-3391