2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 24, 2004 08:00 AM
Secretary of State

DOCUMENT # L00000014271

1. Entity Name
SUNDOWN TWENTY-ONE FAMILY LLC

Principal Place of Business	Mailing Address
420 GULF BLVD. #21 BOCA GRANDE, FL 33921	30440 MOUNTAINSIDE DR. BUENA VISTA, CO 81211

DO NOT WRITE IN THIS SPACE

02152004No Chg-LLC CR2E083 (10/03)

4. FEI Number
65-1055657
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☒ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

INGRAM, MICHAEL M
421 PALM AVE.
BOCA GRANDE, FL 33921

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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. I am familiar with, and accept the obligations of registered agent.

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

Filing Fee is $50.00
Due by May 1, 2004

U00000064550
02/24/04-80016-024 55.00

9.	MANAGING MEMBERS/MANAGERS
TITLE	MGRM
NAME	BRADY, DOUGLAS M
STREET ADDRESS	30440 MOUNTAINSIDE DR.
CITY-ST-ZIP	BUENA VISTA, CO 81211
TITLE	MGRM
NAME	BRADY, CAROL B
STREET ADDRESS	30440 MOUNTAINSIDE DR.
CITY-ST-ZIP	BUENA VISTA, CO 81211
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
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CITY-ST-ZIP	
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CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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.

SIGNATURE: Douglas M Brady Feb 20, 2004 303 906 1845
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #