


**2004 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**  
**Feb 16, 2004 08:00 AM**  
**Secretary of State**

**DOCUMENT # L00000014639**  
 1. Entity Name  
**SUN STATE INTERNATIONAL REAL ESTATE, LLC**



Principal Place of Business 6020 ADAMO DR TAMPA, FL 33619	Mailing Address 6020 ADAMO DR TAMPA, FL 33619
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**DO NOT WRITE IN THIS SPACE**



02022004 No Chg-LLC      CR2E083 (10/03)

4. FEI Number 59-3693112	Applied For Not Applicable
5. Certificate of Status Desired	<input checked="" type="checkbox"/> \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

HORTON, OSCAR J  
 6020 ADAMO DR  
 TAMPA, FL 33619

**DO NOT WRITE IN THIS SPACE**

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reappointing)      DATE \_\_\_\_\_

**Filing Fee is \$50.00 Due by May 1, 2004**

02/16/04-80105-005 165.00

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P HORTON, OSCAR J 6020 ADAMO DR TAMPA, FL 33619
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST HOCKEMEYER, KATHY J 6020 ADAMO DR TAMPA, FL 33619
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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)(f), 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:** *Kathy J. Hockemeyer*      2-3-04      813 621-1331

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE      Date      Daytime Phone #