## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

## **DOCUMENT # L01000003463**

1." Entity Name SUNUP INN, LLC



FILED Apr 25, 2006 08:00 AN Secretary of State

Principal Place of Business

512 ANASTASIA BLVD. AT AUGUSTINE, FL 32080 Mailing Address

512 ANASTASIA BLVD. AT AUGUSTINE, FL 32080



03162006 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 30-0142332 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

GOSAI, CHHAMANGAR S 512 ANASTASIA BLVD ST. AUGUSTINE, FL 32080

STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
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8. The above the obligat	a named entity submits this statement for the purpose of chattons of registered agent.	anging its registered office or registered agent, or b	oth, in the State of Florida. I am familiar with, and accept				
SIGNATURE.	Signature, typed or printed name of registered agent and title if applicable	(NOTE. Registered Agent signature required when reinstating)	DATE				
F	iling Fee is \$50.00 ue by May 1, 2006						
9.	MANAGING MEMBERS/MANAGERS						
MILE	MEM						
NAME	GOSAI, CHHAMANGAR S						
STREET ADDRESS	512 ANASTASIA BLVD.						
CITY-ST-ZIP	ST AUGUSTINE, FL						
TITLE	MEM						
NAME	GOSAI, LILAVANTIC C	<u>]</u>	HOSTOSTOS				
STREET ADDRESS	512 ANASTASIA BLVD.		U00000532556 US/06/06-80080-021 50.00				
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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:	Morai	CHHAMANGAR.	5.	G05 41'	4.	14-	06	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE							Daytime Phone #	