

# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000004532

FILED  
Apr 15, 2004  
Secretary of State

Entity Name: SUNPLEX TAMPA REALTY LLC

**Current Principal Place of Business:**

255 PRIMERA BLVD., SUITE 332  
LAKE MARY, FL 32746

**New Principal Place of Business:**

**Current Mailing Address:**

255 PRIMERA BLVD., SUITE 332  
LAKE MARY, FL 32746

**New Mailing Address:**

FEI Number: 59-3707878

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BEYER, DAVID A  
101 EAST KENNEDY BLVD.  
SUITE 2000  
TAMPA, FL US

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

DONAGHY, KEVIN P  
255 PRIMERA BOULEVARD  
SUITE 332  
LAKE MARY, FL 32746 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: KEVIN P DONAGHY

04/15/2004

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MEMBERS:**

Title: MGRM ( ) Delete  
Name: HACHENBERGER, DONALD J  
Address: 255 PRIMERA BLVD, STE 332  
City-St-Zip: LAKE MARY, FL 32746

Title: MGR ( ) Delete  
Name: MILLER, RICHARD D  
Address: 255 PRIMERA BLVD., STE 332  
City-St-Zip: LAKE MARY, FL 32746

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 608, Florida Statutes.

SIGNATURE: DONALD J HACHENBERGER

MGRM

04/15/2004

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date