

**2003 LIMITED LIABILITY COMPANY
UNIFORM BUSINESS REPORT (UBR)**

FILED
Jan 29, 2003 8:00 am
Secretary of State

01-29-2003 90041 029 ****55.00

0033928

DOCUMENT # L01000013123

1. Entity Name

SUNHILL PROPERTIES, L.L.C.



Principal Place of Business

611 W. AZEELE STREET
TAMPA FL 33606

Mailing Address

611 W. AZEELE STREET
TAMPA FL 33606

20019170



2. Principal Place of Business

233 3rd STREET No.

3. Mailing Address

233 3rd STREET No.

Suite, Apt. #, etc.

SUITE 200

Suite, Apt. #, etc.

SUITE 200

City & State

ST. PETERSBURG, FL

City & State

ST. PETERSBURG, FL

4. FEI Number

59-3739121

Applied For

Not Applicable

CHECK HERE IF MAKING CHANGES

Zip

33701

Country

USA

Zip

33701

Country

USA

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

SMITH, H. STRATTON III
611 W. AZEELE STREET
TAMPA FL 33606

7. Name and Address of New Registered Agent

Name

WILLIAM L. FEELEY

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

233 3rd STREET NORTH

SUITE 200

City

ST. PETERSBURG

FL

Zip Code

33701

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

William L. Feeley

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

1/20/03

DATE

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Florida Department of State
Due By May 1, 2003

9. MANAGING MEMBERS / MANAGERS

TITLE MGR Delete
NAME WILLIAY, FERELY L
STREET ADDRESS 233 3RD STREET
CITY-ST-ZIP SAINT PETERSBURG FL 33701

10. ADDITIONS / CHANGES

TITLE MGR Change Addition
NAME FEELEY, WILLIAM L.
STREET ADDRESS 233 3rd STREET No., SUITE 200
CITY-ST-ZIP ST. PETERSBURG, FL 33701

TITLE Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Delete
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CITY-ST-ZIP

TITLE Delete
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CITY-ST-ZIP

TITLE Change Addition
NAME
STREET ADDRESS
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.

SIGNATURE:

William L. Feeley

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

1/20/03 (727) 894-3800

Date

Daytime Phone #

CR2E083 (10/02)