


**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jan 10, 2005 08:00 AM
Secretary of State

DOCUMENT # L01000017414 1. Entity Name SUN CASA INVESTMENTS, LLC	
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Principal Place of Business 6201 W. 129TH STREET PALOS HEIGHTS, IL 60463	Mailing Address 6201 W. 129TH STREET PALOS HEIGHTS, IL 60463
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DO NOT WRITE IN THIS SPACE



01062005No Chg-LLC CR2E083 (10/03)

4. FEI Number 69-0004269	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

NRAI SERVICES INC.
526 EAST PARK AVENUE
TALLAHASSEE, FL 32301

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

**Filing Fee is \$50.00
Due by May 1, 2005**

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR MCCOMBS, JAMES 6201 W 129TH ST PALOS HEIGHTS, IL 604632331
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR MCCOMBS, YOLANDA 6201 W 129TH ST PALOS HEIGHTS, IL 604632331
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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: JAMES M. COMBS JAMES M. COMBS 1-6-05 708 385-2927
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #