


2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 22, 2005 08:00 AM
Secretary of State

DOCUMENT # L02000005337	
1. Entity Name SUNSHINE OPERATIONS OF LAKE, LLC	

Principal Place of Business 9535 SILVER LAKE DR. LEESBURG, FL 34788	Mailing Address 9535 SILVER LAKE DR. LEESBURG, FL 34788
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DO NOT WRITE IN THIS SPACE



01212005 No Chg-LLC CR2E083 (10/03)

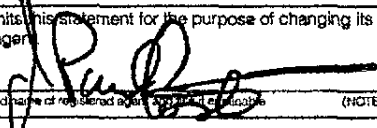
4. FEI Number 14-1886234	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	

6. Name and Address of Current Registered Agent

COSTELLO, JAMES P
9535 SILVER LAKE DR.
LEESBURG, FL 34788

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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:  **DATE:** 4/18/05

(NOTE: Registered Agent signature required when reinstating)

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

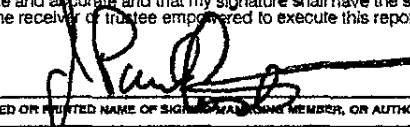
9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	P COSTELLO, JAMES P 9535 SILVER LAKE DR. LEESBURG, FL 34788
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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04/22/05-80015-025 150.00

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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:  **DATE:** 4/18/05 **Daytime Phone #:** 352-408-1400

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