


**2007 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Jul 24, 2007 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # L02000007601</b> 1. Entity Name SUNRISE BEACH ASSOCIATES, LLC	
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Principal Place of Business 14825 FRONT BEACH ROAD PANAMA CITY BEACH, FL 32413	Mailing Address 781 LARSON ST JACKSON, MS 39202
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**DO NOT WRITE IN THIS SPACE**



07022007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 04-3656057	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required

6. Name and Address of Current Registered Agent  BLUE, ROB JR. 221 MCKENZIE AVE PANAMA CITY, FL 32401	<b>DO NOT WRITE IN THIS SPACE</b>
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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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable

**Filing Fee is \$50.00  
Due by September 14, 2007**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM YATES, LLC 781 LARSON ST JACKSON, MS 39202
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR VOYLES, JASON R 781 LARSON ST. JACKSON, MS 39202
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07/24/07-80006-010 50.00

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:**

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

Date

Daytime Phone #

7/18/07

601-351-2079