

# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000016938

FILED  
Apr 27, 2004  
Secretary of State

Entity Name: SONRISE PROPERTIES, L.L.C.

## Current Principal Place of Business:

6464 BARTON CREEK CIRCLE  
LAKE WORTH, FL 33463

## New Principal Place of Business:

## Current Mailing Address:

6464 BARTON CREEK CIRCLE  
LAKE WORTH, FL 33463

## New Mailing Address:

FEI Number: 20-0170003

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LIPSIT, CAROL ANN  
6464 BARTON CREEK CIRCLE  
LAKE WORTH, FL 33463 US

## Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MEMBERS:

Title: MGR ( ) Delete  
Name: LIPSIT, CAROL ANN  
Address: 6464 BARTON CREEK CIRCLE  
City-St-Zip: LAKE WORTH, FL 33463

Title: MGR ( ) Delete  
Name: AVITABLE, LEON M  
Address: 1980 N.W. 127TH TERRACE  
City-St-Zip: CORAL SPRINGS, FL 33071

Title: MGR ( ) Delete  
Name: LEFLER, LINDA C  
Address: 4726 BISON STREET  
City-St-Zip: BOCA RATON, FL 33428

Title: MGR ( ) Delete  
Name: AVITABLE, MARGARET M  
Address: 1980 N.W. 127TH TERRACE  
City-St-Zip: CORAL SPRINGS, FL 33071

## ADDITIONS/CHANGES:

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

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

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: CAROL LIPSIT

MGR

04/27/2004

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