

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000016959

FILED
Apr 23, 2008
Secretary of State

Entity Name: SUN REALTY PARTNERS, LLC

Current Principal Place of Business:

1321 SW 42ND STREET
OCALA, FL 34474 US

New Principal Place of Business:

Current Mailing Address:

1321 SW 42ND STREET
OCALA, FL 34474 US

New Mailing Address:

FEI Number: 01-0754998

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HAINES, TIM D
125 NE 1ST AVE
SUITE 1
OCALA, FL 34470 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/MANAGERS:

Title: MGR () Delete
Name: PAGIDIPATI, DEVAIAH
Address: 1321 SW 42ND STREET
City-St-Zip: Ocala, FL 34474 US

Title: MGRM () Delete
Name: PAGIDIPATI, RUDRAMA D MGRM
Address: 1321 SW 42ND STREET
City-St-Zip: Ocala, FL 34474

Title: MGRM (X) Delete
Name: PAGIDIPATI, SIDDHARTHA D MGRM
Address: 1321 SW 42ND STREET
City-St-Zip: Ocala, FL 34474

Title: MGRM (X) Delete
Name: PAGIDIPATI, SRUJANI D MGRM
Address: 1321 SW 42ND STREET
City-St-Zip: Ocala, FL 34474

Title: MGRM (X) Delete
Name: PAGIDIPATI, RAHULDEV R MGRM
Address: 1321 SW 42ND STREET
City-St-Zip: Ocala, FL 34474

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:

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: DEVAIAH PAGIDIPATI

MGR

04/23/2008

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