# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L02000023175

**FILED**
**Jun 15, 2009**
**Secretary of State**

**Entity Name:** SULLIVAN INVESTMENTS, L.L.C.

| **Current Principal Place of Business:** | **New Principal Place of Business:** |
|---|---|
| 202 BLUEJACK STREET<br>SANTA ROSA BEACH, FL  32459    US | |

| **Current Mailing Address:** | **New Mailing Address:** |
|---|---|
| 202 BLUEJACK STREET<br>SANTA ROSA BEACH, FL  32459    US | |

FEI Number: 54-2071686        FEI Number Applied For ( )        FEI Number Not Applicable ( )        Certificate of Status Desired ( )

**In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.**

| **Name and Address of Current Registered Agent:** | **Name and Address of New Registered Agent:** |
|---|---|
| HELMICH, KEVIN M ESQUIRE<br>4481 LEGENDARY DRIVE<br>SUITE 200<br>DESTIN, FL  32541  US | |

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:        SULLIVAN, JOHN DAVID
Address:     202 BLUEJACK STREET
City-St-Zip: SANTA ROSA BEACH, FL  32459 US

Title:        MGR        ( ) Delete
Name:        SULLIVAN, DAVID CARROLL
Address:     235 CLOISTER GREEN LANE
City-St-Zip: MEMPHIS, TN  38120 US

**ADDITIONS/CHANGES:**

Title:        MGR        (X) Change ( ) Addition
Name:        SULLIVAN, JOHN D
Address:     202 BLUEJACK STREET
City-St-Zip: SANTA ROSA BEACH, FL  32459 US

Title:        MGR        (X) Change ( ) Addition
Name:        SULLIVAN, DAVID C
Address:     235 CLOISTER GREEN LANE
City-St-Zip: MEMPHIS, TN  38120 US

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:  JOHN D. SULLIVAN                                        MGR                        06/15/2009
_____
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date