2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000031049

Entity Name: SON LIGHT MANAGEMENT COMPANY, LLC

FILED Apr 27, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

10910 SW 58TH AVE. RD. 5745 S.W. 43RD ST RD. OCALA, FL 34476 OCALA, FL 34474

Current Mailing Address: New Mailing Address:

10910 SW 58TH AVE. RD. 5745 S.W. 43RD ST RD OCALA, FL 34476 OCALA, FL 34474

FEI Number: 34-1963992 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

LAWROSKI, MARY LAWROSKI, MARY 10910 S.W. 58TH AVE RD. 5745 S.W. 43RD ST RD OCALA, FL 34476 OCALA, FL 34474

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: MARY LAWROSKI 04/27/2005

> Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MEMBERS: ADDITIONS/CHANGES:

MGRM Title: MGRM () Delete

(X) Change () Addition ONORATO, RICHARD ONORATO, RICHARD Name: Name: 12085 BURLINGTON GLEN Address: 5745 S.W. 43RD ST RD Address: City-St-Zip: CHARDON, OH 44024 City-St-Zip: OCALA, FL 34474

Title: MGRM () Delete Title: MGRM (X) Change () Addition LAWROSKI, GREG Name: LAWROSKI, GREG Name: Address: 10910 S.W. 58TH AVE. RD. Address: 5745 S.W. 43RD ST RD

City-St-Zip: OCALA, FL 34476 City-St-Zip: OCALA, FL 34474

Title: MGRM () Delete Title: MGRM (X) Change () Addition

LAWROSKI, MARY LAWROSKI, MARY Name: Name: 10910 S.W. 58TH AVE. RD. Address: Address: 5745 S.W. 43RD ST RD City-St-Zip: OCALA, FL 34476 City-St-Zip: OCALA, FL 34474

Title: MGRM () Delete Title: MGRM (X) Change () Addition

Name: ONORATO, KATHY Name: ONORATO, KATHY Address: 11850 MAYFIELD RD Address: 5745 S.W. 43RD ST RD City-St-Zip: CHARDON, OH 44024 City-St-Zip: OCALA, FL 34474

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: MARY LAWROSKI 04/27/2005