

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000035006

FILED
Apr 30, 2004
Secretary of State

Entity Name: SUNBUILT LASER HOMES, L.L.C.

Current Principal Place of Business:

10003-133RD ST. NORTH
SEMINOLE, FL 33776

New Principal Place of Business:

Current Mailing Address:

10003-133RD ST. NORTH
SEMINOLE, FL 33776

New Mailing Address:

FEI Number: 30-0135184

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ZARZYCKI, EDWARD S
13044 FARMINGTON TRAIL
SEMINOLE, FL 33776 US

Name and Address of New Registered Agent:

CALEB, ROBERT T
10003-133 STREET NORTH
SEMINOLE, FL 33776 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: ROBERT T. CALEB

04/30/2004

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGR () Delete
Name: ZARZYCKI, EDWARD S
Address: 13044 FARMINGTON TRAIL
City-St-Zip: SEMINOLE, FL 33706

Title: MGR () Delete
Name: WEBB, KEVIN S
Address: 13044 FARMINGTON TRAIL
City-St-Zip: SEMINOLE, FL 33706

Title: MGR () Delete
Name: CALEB, ROBERT T
Address: 10003-133RD ST. NORTH
City-St-Zip: SEMINOLE, FL 33776

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:

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: ROBERT T. CALEB

MGR

04/30/2004

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