

# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000007126

Entity Name: SUNNY BUBBLES, L.L.C.

FILED  
Apr 04, 2004  
Secretary of State

**Current Principal Place of Business:**

12681 CHARTWELL DRIVE  
FORT MYERS, FL 33912

**New Principal Place of Business:**

**Current Mailing Address:**

12681 CHARTWELL DRIVE  
FORT MYERS, FL 33912

**New Mailing Address:**

FEI Number: 43-2004670

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

PAUL J. MURRAY CPA, P.A.  
215 CELEBRATION PLACE, SUITE 500  
CELEBRATION, FL 34747 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: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title: MGR ( ) Change (X) Addition  
Name: WALLNER, ROBERT J  
Address: 12681 CHARTWELL DRIVE  
City-St-Zip: FORT MYERS, FL 33912

Title: MGRM ( ) Change (X) Addition  
Name: WALLNER, DONNA  
Address: 408 CAMPUS STREET  
City-St-Zip: CELEBRATION, FL 34747

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 WALLNER

MGR

04/04/2004

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