


**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Mar 10, 2005 08:00 AM
Secretary of State

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|---|---|
| DOCUMENT # L03000018274 1. Entity Name SUMMERHILL PARTNERS, LLC |  |
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|---|---|
| Principal Place of Business 17 LA VISTA DRIVE PONTE VEDRA BEACH, FL 32082 | Mailing Address 17 LA VISTA DRIVE PONTE VEDRA BEACH, FL 32082 |
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02142005No Chg-LLC

CR2E083 (10/03)

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| 4. FEI Number 51-0473041 | Applied For <input type="checkbox"/> Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required | |

6. Name and Address of Current Registered Agent

**STONEBURNER BERRY & SIMMONS, P.A.
841 PRUDENTIAL DRIVE, STE. 140
JACKSONVILLE, FL 32207**

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IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**Filing Fee is \$50.00
Due by May 1, 2005**

000000258591
03/10/05-80047-007 50.00

9. MANAGING MEMBERS/MANAGERS

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|--|--|
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | MGR HANAN, JOHN H 17 LA VISTA DRIVE PONTE VEDRA BEACH, FL 32082 |
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11. I hereby certify that the information supplied with this filing does not qualify 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 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 Hanan, Mgr Ptn. **9/8/05** **904 873-4050**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #