

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000023052

FILED
May 03, 2004
Secretary of State

Entity Name: SUNSHINE HOLDINGS & INVESTMENTS, LLC

Current Principal Place of Business:

108 SE NARANJA AV
PORT ST. LUCIE, FL 34983

New Principal Place of Business:

P O BOX 7806
PORT ST. LUCIE, FL 34985

Current Mailing Address:

P O BOX 7806
PORT ST. LUCIE, FL 34985

New Mailing Address:

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

ANTOINE, JAMES
108 SE NARANJA AV
PORT ST. LUCIE, FL 34983 US

Name and Address of New Registered Agent:

ANTOINE, JAMES
P O BOX 7806
PORT ST. LUCIE, FL 34985 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: JAMES ANTOINE

05/03/2004

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: ANTOINE, JAMES
Address: 108 SE NARANJA AV
City-St-Zip: PORT ST. LUCIE, FL 34983

Title: MGR () Delete
Name: ANOTINE, ROSE L
Address: 108 SE NARANJA AV
City-St-Zip: PORT ST. LUCIE, FL 34983

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: ANTOINE, JAMES
Address: P O BOX 7806
City-St-Zip: PORT ST. LUCIE, FL 34985

Title: MGR (X) Change () Addition
Name: ANOTINE, ROSE L
Address: P O BOX 7806
City-St-Zip: PORT ST. LUCIE, FL 34985

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: JAMES ANTOINE

MGRM

05/03/2004

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