

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000028576

FILED  
Apr 26, 2005  
Secretary of State

**Entity Name:** SUNSET REALTY EXECUTIVES, LLC

**Current Principal Place of Business:**

16821 PANAMA CITY BEACH PARKWAY  
PANAMA CITY BEACH, FL 32413

**New Principal Place of Business:**

**Current Mailing Address:**

16821 PANAMA CITY BEACH PARKWAY  
PANAMA CITY BEACH, FL 32413

**New Mailing Address:**

**FEI Number:** 42-1602925

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SUNSET REALTY EXECUTIVES, INC.  
16821 PANAMA CITY BEACH PARKWAY  
PANAMA CITY BEACH, FL 32413 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: MGR ( ) Delete  
Name: SUNSET REALTY EXECUT, IVES, INC.  
Address: 16821 PANAMA CITY BEACH PARKWAY  
City-St-Zip: PANAMA CITY BEACH, FL 32413

Title: MGR ( ) Delete  
Name: BAY COASTAL PROPERTI, ES, INC.  
Address: 754 DUPARC CIRCLE  
City-St-Zip: TALLAHASSEE, FL 32312

**ADDITIONS/CHANGES:**

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: JAMES R. TUCKER JR.

MGR

04/26/2005

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