

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000033171

FILED
Jul 07, 2004
Secretary of State

Entity Name: SUN DEVELOPMENT & INVESTMENT COMPANY LLC

Current Principal Place of Business:

7392 AIRPORT VIEW DRIVE SW
ROCHESTER, MN 55902

New Principal Place of Business:

Current Mailing Address:

75 WEST HODGE ROAD
SANTA ROSA BEACH, FL 32459

New Mailing Address:

7392 AIRPORT VIEW DRIVE SW
ROCHESTER, MN 55902

FEI Number: 20-0253388

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CARTER, JEANNE
75 WEST HODGE ROAD
SANTA ROSA BEACH, FL 32459 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: CHAFOULIAS, ANDREW C
Address: 7392 AIRPORT VIEW DRIVE SW
City-St-Zip: ROCHESTER, MN 55902

Title: MGRM () Delete
Name: CHAFOULIAS, ANDREW C
Address: 7392 AIRPORT VIEW DRIVE SW
City-St-Zip: ROCHESTER, MN 55902

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

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGR () Change (X) Addition
Name: CHAFOULIAS, GUS A
Address: 121 23RD AVENUE SW, STE 105
City-St-Zip: ROCHESTER, MN 55902

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: ANDREW C. CHAFOULIAS

MGR

07/07/2004

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