

# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000041450

FILED  
Apr 21, 2004  
Secretary of State

Entity Name: SUNSTATE COMMERCE PLAZA LC

**Current Principal Place of Business:**

1620 BAY ROAD  
SARASOTA, FL 34239

**New Principal Place of Business:**

**Current Mailing Address:**

1620 BAY ROAD  
SARASOTA, FL 34239

**New Mailing Address:**

FEI Number: 20-0408990

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BEYCHOK, DANIEL E  
1620 BAY ROAD  
SARASOTA, FL 34239 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: MGRM ( ) Delete  
Name: BEYCHOK, DANIEL E  
Address: 1620 BAY ROAD  
City-St-Zip: SARASOTA, FL 34239

Title: MGRM ( ) Delete  
Name: HAND, RANDALL M  
Address: 160 LAKE JUNE ROAD  
City-St-Zip: LAKE PLACID, FL 33852

Title: MGRM ( ) Delete  
Name: ALVAREZ, CARLOS  
Address: 8910 ERIE LANE  
City-St-Zip: PARRISH, FL 34219

**ADDITIONS/CHANGES:**

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

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: DANIEL E BEYCHOK

MGRM

04/21/2004

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