

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT


4/27

FILED
May 26, 2004 8:00 am
Secretary of State

04-27-2004 90016 010 ****50.00

DOCUMENT # L03000044707

1. Entry Name
SUNSHINE VI LLC



Principal Place of Business
 2268 LAVISTA AVENUE
 PENSACOLA, FL 32504

Mailing Address
 2268 LAVISTA AVENUE
 PENSACOLA, FL 32504

34007638



2. Principal Place of Business
 Suite, Apt. #, etc.

3. Mailing Address
 Suite, Apt. #, etc.

02242004 Chg-LLC CR2E083 (10/03)

City & State
 Zip Country

4. FEI Number
54-2144221

Applied For
 Not Applicable

5. Certificate of Status Desired **\$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent
GROVER ROBINSON & ASSOCIATES, INC.
 2268 LAVISTA AVENUE
 PENSACOLA, FL 32504

7. Name and Address of New Registered Agent
 Name **Bruce Vredenburg**
 Street Address (P.O. Box Number is Not Acceptable)
2153 Copley Dr
 City **Pensacola** FL Zip Code **32503**

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 **Bruce Vredenburg** DATE **3-17-04**

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

Filing Fee is \$50.00 Due by May 1, 2004

Make check payable to Florida Department of State

9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE	NAME	TITLE	NAME
MGR	VIDEAU, BRENT D		
STREET ADDRESS	4530 FRANCISCO ROAD		
CITY-ST-ZIP	PENSACOLA, FL 32504		
MGRM	WESTERN GATE PROPERTIES INC.		
STREET ADDRESS	2268 LAVISTA AVENUE		
CITY-ST-ZIP	PENSACOLA, FL		
MGR	SOWELL, ADEN K		
STREET ADDRESS	2310 BANQUOS TRAIL		
CITY-ST-ZIP	PENSACOLA, FL 32504		

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: **Bruce Vredenburg** DATE: **3-17-04** (850) 202-4245

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE