

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000011334

FILED  
Jul 30, 2007  
Secretary of State

Entity Name: FUNSHINE PROPERTY, LLC

**Current Principal Place of Business:**

6700 OAK SHORE DR  
# 308  
PANAMA CITY, FL 32404 US

**New Principal Place of Business:**

1807 MASSACHUSETTS AVE  
LYNN HAVEN, FL 32444 US

**Current Mailing Address:**

P.O. BOX 10402  
PANAMA CITY, FL 32404 US

**New Mailing Address:**

FEI Number: 90-0144746      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

VANASTEN, CHRISTOPHER J  
6700 OAKSHORE DR, # 308  
PANAMA CITY, FL 32404 US

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

VAN ASTEN, CHRISTOPHER J  
1807 MASSACHUSETTS AVE  
LYNN HAVEN, FL 32444 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: CHRISTOPHER VAN ASTEN

07/30/2007

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: VANASTEN, CHRISTOPHER J  
Address: 6700 OAKSHORE DR, # 308  
City-St-Zip: PANAMA CITY, FL 32404 US

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: VAN ASTEN, CHRISTOPHER J  
Address: 1807 MASSACHUSETTS AVE  
City-St-Zip: LYNN HAVEN, FL 32444 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: CHRISTOPHER VAN ASTEN

MBR

07/30/2007

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