

2008 LIMITED LIABILITY COMPANY  
ANNUAL REPORT

2/14

**FILED**  
**Mar 14, 2008 8:00 am**  
**Secretary of State**

02-14-2008 90075 026 \*\*\*138.75

DOCUMENT # L04000023252

1. Entity Name  
SUN C.G., LLC



Principal Place of Business  
8970 SEMINOLE BLVD  
SEMINOLE, FL 33772 US

Mailing Address  
8970 SEMINOLE BLVD  
SEMINOLE, FL 33772 US



02062008 No Chg-LLC

CR2E083 (12/07)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
74-3132827

Applied For  
Not Applicable

6. Certificate of Status Desired ☐

\$5.00 Additional  
Fee Required

6. Name and Address of Current Registered Agent

MCNAMARA, THOMAS P  
2909 BAY TO BAY BLVD., SUITE 309  
TAMPA, FL 33629

**DO NOT WRITE  
IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$138.75**  
**After May 1, 2008 Fee will be \$538.75**

B. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	TEAL, RICHARD D
STREET ADDRESS	8970 SEMINOLE BLVD
CITY-STATE-ZIP	SEMINOLE, FL 33772
TITLE	MGR
NAME	OHANLAN, DENNIS
STREET ADDRESS	8970 SEMINOLE BLVD
CITY-STATE-ZIP	SEMINOLE, FL 33772
TITLE	
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	

**DO NOT WRITE  
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:

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

3/16/08

Date

727-546-4355

Daytime Phone #