

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000031505

FILED  
Aug 23, 2006  
Secretary of State

Entity Name: SUNSTAR DEVELOPEMNT, LLC

**Current Principal Place of Business:**

30 GLENCAIRN ROAD  
PALM BEACH GARDENS, FL 33418

**New Principal Place of Business:**

**Current Mailing Address:**

30 GLENCAIRN ROAD  
PALM BEACH GARDENS, FL 33418

**New Mailing Address:**

FEI Number: 13-4279359      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:**

DE MARW, VICTORIA J.  
30 GLENCAIRN ROAD  
PALM BEACH GARDENS, FL 33418      US

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

DE MARCO, VICTORIA  
30 GLENCAIRN ROAD  
PALM BEACH GARDENS, FL 33418      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: VICTORIA DEMARCO

08/23/2006

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: P      ( ) Delete  
Name: DE MARCO, PAUL N.  
Address: 30 GLENCAIRN ROAD  
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: V      ( ) Delete  
Name: SEVERINE, SR, LOUIS A.  
Address: 140 GREENPOINT CIRCLE  
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: T      (X) Delete  
Name: DE MARCO, VICTORIA J.  
Address: 30 GLENCAIRN ROAD  
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: S      (X) Delete  
Name: SEVERINE, MARY L.  
Address: 140 GREENPOINT CIRCLE  
City-St-Zip: PALM BEACH GARDENS, FL 33418

**ADDITIONS/CHANGES:**

Title: M      (X) Change ( ) Addition  
Name: SEVERINE, SR, LOUIS  
Address: 140 GREENPOINT CIRCLE  
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: M      (X) Change ( ) Addition  
Name: DE MARCO, VICTORIA  
Address: 30 GLENCAIRN ROAD  
City-St-Zip: PALM BEACH GARDENS, FL 33418

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 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: VICTORIA DEMARCO

M

08/23/2006

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