2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 06, 2009
Secretary of State

DOCUMENT# L04000039676

Entity Name: SUN VISTA INDIAN PASS, LLC

Current Principal Place of Business:

C/O ERNEST L. MASCARA
721 FIRST AVENUE NORTH
ST. PETERSBURG, FL 33701 US

New Principal Place of Business:

Current Mailing Address:

C/O ERNEST L. MASCARA
PO BOX 266
ST. PETERSBURG, FL 33731 US

New Mailing Address:

FEI Number: 20-1177779 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MASCARA, ERNEST L
721 FIRST AVENUE NORTH
ST. PETERSBURG, FL 33701 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/MANAGERS:

Title:	MGRM	( ) Delete
Name:	SVIP, LLC,	
Address:	PO BOX 266	
City-St-Zip:	ST. PETERSBURG, FL 33731 US	
Title:	MGRM	( ) Delete
Name:	INDIAN PASS CONDOS,, LLC	
Address:	304 BAY STREET SOUTH	
City-St-Zip:	BRADENTON BEACH, FL 34214 US	
Title:	MGRM	( ) Delete
Name:	WHITECAP PROPERTIES,, LLC	
Address:	5871 GULF OF MEXICO DRIVE	
City-St-Zip:	LONGBOAT KEY, FL 34228 US	
Title:	MGRM	( ) Delete
Name:	THE WAVE GROUP, LLC,	
Address:	115 THIRD STREET SOUTH	
City-St-Zip:	BRADENTON, FL 34217 US	

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

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: JOHN D. ALFORD MGRM 04/06/2009

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