

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000081320

FILED
Apr 29, 2009
Secretary of State

Entity Name: PB LLC

Current Principal Place of Business:

2087 SARNO RD
MELBOURNE, FL 32935

New Principal Place of Business:

Current Mailing Address:

2087 SARNO RD
MELBOURNE, FL 32935

New Mailing Address:

FEI Number: 11-3732829

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COLEMAN, CHRISTOPHER J ESQUIRE
1311 BEDFORD DRIVE
MELBOURNE, FL 32940 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: SUN CASTLES, INC.
Address: 2087 SARNO RD
City-St-Zip: MELBOURNE, FL 32935

Title: MGRM () Delete
Name: ROSSI, GLORIA
Address: 121 LANSING ISLAND DR.
City-St-Zip: INDIAN HARBOR BEACH, FL 32937

Title: MGRM () Delete
Name: ROSSI, JOHN
Address: 121 LANSING ISLAND DR.
City-St-Zip: INDIAN HARBOUR BEACH, FL 32937

Title: MGRM () Delete
Name: WIENCHOSKI, CHAROTTE
Address: 220 LANSING ISLAND DR.
City-St-Zip: INDIAN HARBOUR BEACH, FL 32937

Title: MGRM () Delete
Name: WIENCHOSKI, THOMAS
Address: 220 LANSING ISLAND DR.
City-St-Zip: INDIAN HARBOUR BEACH, FL 32937

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:

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: THOMAS WIENCHOSKI

MGRM

04/29/2009

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