

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000017825

Entity Name: SUN COMPASS, LLC

FILED
Jul 07, 2009
Secretary of State

Current Principal Place of Business:

526 WEDGEWOOD WAY
NAPLES, FL 34119

New Principal Place of Business:

6610 DANIELS ROAD
NAPLES, FL 34109

Current Mailing Address:

526 WEDGEWOOD WAY
NAPLES, FL 34119

New Mailing Address:

6610 DANIELS ROAD
NAPLES, FL 34109

FEI Number: 20-2375897 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:

R&A AGENTS, INC. ATTN MICHAEL YASHKO
2320 FIRST STREET
FORT MYERS, FL 33901 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: MGR () Delete
Name: YASHKO, MICHAEL S
Address: 526 WEDGEWOOD WAY
City-St-Zip: NAPLES, FL 34119 US

Title: MGR () Delete
Name: YASHKO, LORI
Address: 526 WEDGEWOOD WAY
City-St-Zip: NAPLES, FL 34119 US

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: YASHKO, MICHAEL S
Address: 6610 DANIELS ROAD
City-St-Zip: NAPLES, FL 34109 US

Title: MGR (X) Change () Addition
Name: YASHKO, LORI
Address: 6610 DANIELS ROAD
City-St-Zip: NAPLES, FL 34109 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: MICHAEL S. YASHKO

MGR

07/07/2009

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