## **2008 LIMITED LIABILITY COMPANY** ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

## **DOCUMENT # L05000020448**

1. Entity Name RISING SUN ESTATES, LLC



**FILED** Apr 24, 2008 08:00 AN Secretary of State

Principal Place of Business

300 EAST HIGHWAY 50 CLERMONT, FL 34711 Mailing Address

300 EAST HIGHWAY 50 CLERMONT, FL 34711



02202008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number Applied For 20-2522717 Not Applicable \$5.00 Additional 

5. Certificate of Status Desired

Fee Required

6. Name and Address of Current Registered Agent

VALLERY, MARK G 300 EAST HIGHWAY 50 CLERMONT, FL 34711

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| <ol><li>The above n</li></ol> | amed entity submits this sta | atement for the purpose of cha | anging its registered office ( | or registered agent, or both, in | the State of Florida. I | am familiar with, and accept |
|-------------------------------|------------------------------|--------------------------------|--------------------------------|----------------------------------|-------------------------|------------------------------|
| the obligation                | ns of registered agent.      |                                |                                |                                  |                         |                              |
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(NOTE Registered Agent signature required when reinstating)

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

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

| 9. MANAGING MEMBEHS/MANAGEHS          |   |  |  |  |
|---------------------------------------|---|--|--|--|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGRM VALLERY FLORIDA HOLDING COMPANY 300 EAST HIGHWAY 50 CLERMONT, FL 34711 |  |  |  |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP |   |  |  |  |
| TITLE NAME STREET ADDRESS CIFY-ST-ZIP |   |  |  |  |
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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**