

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000039187

FILED
Jan 28, 2009
Secretary of State

Entity Name: FLORIDA SUNFLOWER, L.L.C.

Current Principal Place of Business:

2735 SANTA BARBARA BLVD. SUITE 201
CAPE CORAL, FL 33914

New Principal Place of Business:

Current Mailing Address:

2735 SANTA BARBARA BLVD. SUITE 201
CAPE CORAL, FL 33914

New Mailing Address:

15930 KNIGHTSBRIDGE CT
FORT MYERS, FL 33908

FEI Number: 20-2759644

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WRIGHT, CHRISTINE F ESQ.
2735 SANTA BARBARA BLVD., SUITE 201
CAPE CORAL, FL 33914 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: LEIENDECKER, GUIDO
Address: 15930 KNIGHTSBRIDGE COURT
City-St-Zip: FORT MYERS, FL 33908 US

Title: MGR () Delete
Name: LEIENDECKER, RUTH
Address: 15930 KNIGHTSBRIDGE COURT
City-St-Zip: FORT MYERS, FL 33908 US

Title: MGR (X) Delete
Name: PELZER, GERHARD
Address: 20199 MARKWARD CROSSING
City-St-Zip: ESTERO, FL 33928 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:

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: LEIENDECKER, RUTH

MGR

01/28/2009

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