2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L05000053078

1. Entity Name

SUNSET HILLS OF CENTRAL FLORIDA, L.L.C.



FILED Apr 14, 2008 08:00 Al Secretary of State

Principal Place of Business

Mailing Address

1420 SOUTH FLORIDA AVE. LAKELAND, FL 33803 1420 SOUTH FLORIDA AVE. LAKELAND, FL 33803



02182008 No Chg-LLC

CR2E083 (12/07)

4,	FEI Number 11-3750949	
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Applied For Not Applicable

6. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

DO NOT WRITE IN THIS SPACE

HARPER, PAUL S 1420 SOUTH FLORIDA AVE. LAKELAND, FL 33803

DO NOT WRITE IN THIS SPACE

The above named entity submits this statement for the purpose of cha the obligations of registered agent.	anging its registered office or registered agent, or both	, in the State of Florida. I am familiar with, and acce	pt
Signature Signature, typed or printed name of registered agent and title if applicable	(NOTE: Registered Agent signature required when reinstating)	DATE	
		HOOGOOGGACA	_

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

U00000897051 04/25/08-80033-008 138.75

9.	MANAGING MEMBERS/MANAGERS
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR HARPER, PAUL S 1420 SOUTH FLORIDA AVENUE LAKELAND, FL 33803
NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

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 trusted improvement to receive this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

SIGNATURE AND TYPED OR PRIVIED NAME OF MIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Daytime Phone #