

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000068853

**FILED**  
**Mar 03, 2009**  
**Secretary of State**

**Entity Name:** SUNSHINE LAND EXCHANGE, LLC

**Current Principal Place of Business:**

2806 W US 90 STE 101  
LAKE CITY, FL 32055 US

**New Principal Place of Business:**

2806 W US 90  
SUITE 101  
LAKE CITY, FL 32055 US

**Current Mailing Address:**

PO BOX 3659  
LAKE CITY, FL 32056 US

**New Mailing Address:**

**FEI Number:** 20-3164218      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CRAPPS, DANIEL  
2806 W US 90 STE 101  
LAKE CITY, FL 32055 US

**Name and Address of New Registered Agent:**

CRAPPS, DANIEL  
2806 W US 90  
SUITE 101  
LAKE CITY, FL 32055 US

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: \_\_\_\_\_

03/03/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: CRAPPS, DANIEL  
Address: PO BOX 3659  
City-St-Zip: LAKE CITY, FL 32056

**ADDITIONS/CHANGES:**

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: DANIEL CRAPPS

MGRM

03/03/2009

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