

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000069268

FILED
Apr 02, 2009
Secretary of State

Entity Name: SUNCOAST ESTATES FL LLC

Current Principal Place of Business:

10507 BARTONIA COURT
NEW PORT RICHEY, FL 34655

New Principal Place of Business:

Current Mailing Address:

10507 BARTONIA COURT
NEW PORT RICHEY, FL 34655

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OSBORNE, DAVID R
10507 BARTONIA COURT
NEW PORT RICHEY, FL 34655 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: MGRM () Delete
Name: OSBORNE, DAVID R
Address: 10507 BARTONIA COURT
City-St-Zip: NEW PORT RICHEY, FL 34655

Title: MGRM () Delete
Name: OSBORNE, DEBRA M
Address: 10507 BARTONIA COURT
City-St-Zip: NEW PORT RICHEY, FL 34655

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: OSBORNE, DAVID R
Address: 10507 BARTONIA COURT
City-St-Zip: NEW PORT RICHEY, FL 34655 US

Title: MGRM (X) Change () Addition
Name: OSBORNE, DEBRA M
Address: 10507 BARTONIA COURT
City-St-Zip: NEW PORT RICHEY, FL 34655 US

Title: MGRM () Change (X) Addition
Name: BAKER, GARY H
Address: 3001 EXECUTIVE DRIVE, SUITE 390
City-St-Zip: CLEARWATER, FL 33762 US

Title: MGRM () Change (X) Addition
Name: SAMSON, FREDERIC
Address: 8820 BELAGIO DRIVE
City-St-Zip: NEW PORT RICHEY, FL 34655 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: DAVID R OSBORNE

MGR

04/02/2009

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