

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000112020

Entity Name: SONSHINE INSTALLATIONS LLC

FILED
Apr 30, 2009
Secretary of State

Current Principal Place of Business:

558 E. JENKINS CT.
HERNANDO, FL 34442 US

New Principal Place of Business:

2727 E JUPITER ST
INVERNESS, FL 34453 US

Current Mailing Address:

558 E. JENKINS CT.
HERNANDO, FL 34442 US

New Mailing Address:

2727 E JUPITER ST
INVERNESS, FL 34453 US

FEI Number: 76-0806703

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KOPERA, DAMIAN M
558 E JENKINS CT
HERNANDO, FL 34442 US

Name and Address of New Registered Agent:

KOPERA, DAMIAN M
2727 E JUPITER ST
INVERNESS, FL 34453 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: DAMIAN KOPERA

04/30/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: PRES () Delete
Name: KOPERA, DAMIAN M
Address: 558 E. JENKINS CT.
City-St-Zip: HERNANDO, FL 34442 US

Title: VP () Delete
Name: KOPERA, AMANDA M
Address: 558 E JENKINS CT.
City-St-Zip: HERNANDO, FL 34442

ADDITIONS/CHANGES:

Title: PRES (X) Change () Addition
Name: KOPERA, DAMIAN M
Address: 2727 E JUPITER ST
City-St-Zip: INVERNESS, FL 34453 US

Title: VP (X) Change () Addition
Name: KOPERA, AMANDA M
Address: 2727 E JUPITER ST
City-St-Zip: INVERNESS, FL 34453

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: DAMIAN M KOPERA

PRES

04/30/2009

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