

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 09, 2008 8:00 am
Secretary of State

04-09-2008 90122 023 ***138.75

DOCUMENT # L06000019593

1. Entity Name
500 SUNSET DRIVE L.L.C.



Principal Place of Business
278 CRYSTAL GROVE BLVD.
LUTZ, FL 33548

Mailing Address
278 CRYSTAL GROVE BLVD.
LUTZ, FL 33548

00000010



04082008 No Chg-LLC

CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number
NOT APPLICABLE

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

LIVINGSTON, CLIFTON A
278 CRYSTAL GROVE BLVD.
LUTZ, FL 33548

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

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

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	LIVINGSTON, CLIFTON A
STREET ADDRESS	278 CRYSTAL GROVE BLVD.
CITY-ST-ZIP	LUTZ, FL 33548

TITLE	
NAME	
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CITY-ST-ZIP	

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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 trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: Clifton A. Livingston

SIGNATURE AND TYPED OR PRINTED NAME OF SERVING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

Managing Member, 4/8/08 (813) 431-6800