2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 02, 2007
Secretary of State

DOCUMENT# L06000097304

Entity Name: SUNCOAST SALES, LLC

Current Principal Place of Business:

23804 PLANTATION PALMS BOULEVARD
LAND O'LAKES, FL 34639 US

New Principal Place of Business:

5250 EAGLE TRAIL DRIVE
SUITE B
TAMPA, FL 33634 US

Current Mailing Address:

23804 PLANTATION PALMS BOULEVARD
LAND O'LAKES, FL 34639 US

New Mailing Address:

5250 EAGLE TRAIL DRIVE
SUITE B
TAMPA, FL 33634 US

FEI Number: 20-5689224 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

BROWN, CASEY A
23804 PLANTATION PALMS BOULEVARD
LAND O'LAKES, FL 34639 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: BROWN, CASEY A
Address: 23804 PLANTATION PALMS BOULEVARD
City-St-Zip: LAND O'LAKES, FL 34639 US

Title: MGRM ( ) Delete
Name: O'SULLIVAN, DANIEL T
Address: 14327 DOVE DRIVE
City-St-Zip: CARMEL, IN 46033 US

ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: MGRM (X) Change ( ) Addition
Name: O'SULLIVAN, DANIEL T
Address: 5934 JAEGERGLEN DRIVE
City-St-Zip: LITHIA, FL 33547 US

I hereby certify that the information supplied with this filing does not qualify for the 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 O'SULLIVAN MGRM 02/02/2007

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