

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000097736

**FILED**  
**Feb 16, 2011**  
**Secretary of State**

**Entity Name:** SUNSHINE ASSOCIATES LLC

**Current Principal Place of Business:**

840 US HWY 1  
SUITE 435A  
NORTH PALM BEACH, FL 33408 US

**New Principal Place of Business:**

**Current Mailing Address:**

840 US HWY 1  
SUITE 435A  
NORTH PALM BEACH, FL 33408 US

**New Mailing Address:**

**FEI Number:** 20-5699830

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

YOCKEY, SUE ANN  
9278 HEATHRIDGE DRIVE  
WEST PALM BEACH, FL 33411 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  
**Name:** BANSAL, RAJ MD  
**Address:** 875 MILITARY TRAIL SUITE 200  
**City-St-Zip:** JUPITER, FL 33458 US

**Title:** SECR  
**Name:** PONCY, MORGAN MD  
**Address:** 601 UNIVERSITY DRIVE STE 201  
**City-St-Zip:** JUPITER, FL 33458 US

**Title:** TRSR  
**Name:** LUBARSKY, AMIR MD  
**Address:** 600 HERITAGE DRIVE STE 101  
**City-St-Zip:** JUPITER, FL 33458 US

I hereby 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:** AMIR LUBARSKY, MD

MGR

02/16/2011

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