## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

## FILED May 06, 2008 8:00 am Secretary of State

DOCUMENT # L07000065568  1. Entity Name RR SUNSHINE ENTERPRISES LLC							05-06-2008	90007 (	)14 ***13	38.75
Principal Plac	o of Business		Mailing Address			7	•			
Principal Place of Business Maiting Address							oneco –			
713 EGLIN PKWY., NE			713 EGLIN PKWY., NE			I DUU	39668			
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2 Principal P	tace of Rusiness	- No P.O. Boy #	3. Mailing Address			<u>-</u>			# 501 114 11	
2. Principal Place of Business - No P.O. Box # 3. Mailing Address						}	49TH 1880 46TH 26TH CATH	THE FIRE E	AF EULLE ELLEI IU	UKBU LUI EBOT
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Suite, Apt. #, etc.			Suite, Apt. #, etc.			02222008	Chg-LLC	CR2EM	33 (12/06)	
							org-tro	ONZEU	75 (12100)	
City & Stat	e		City & State			4. FEI Numbe	er	· · · · · · · · · · · · · · · · · · ·	ΙAρ	plied For
						297	-30-981	8	No.	1 Applicable
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24	"	ousiny	44	Coun	uy	5. Certificate	of Status Desired		\$5.00 Add	litional
			<u> </u>	<u> </u>		<u> </u>			ee Require	d
	6. Name and	Address of Current I	Registered Agent			7. Name and	Address of New Ro	gistered A	gent	
	-				Name					
ROBERTO	D, ROSEMAR	ΥJ	•							
	PKWY. NE	. •			Street Address	(P.O. Box Number	er is Not Acceptable	)	-	
•	ON BEACH, F	1 22547								•
TIVALIC	JN DEACH, I	L 32341								
	-									•
	• .			ĺ	City			FL	Zip Code	
								FL		
8. The above	named entity sub	omits this statement for	the purpose of changing its	s registere	ed affice or registe	ered agent, or bo	th, in the State of Flo	ida. I am f	amiliar with,	and accept
the obligat	ions of registered	agent.		-		4.			•	
) ÷	-									
SIGNATURE .										
	Signature, typed or pri	Med name of registered agent a	and title if applicable. (AD	It: Hegistere	d Agent eignature require	ed when remaining)		DATE		
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After May		will be \$538.75		10			Florida	Departme		• •
After May	/ 1, 2008 Fee		RS/MANAGERS	10.	,			Departme	ent of State	
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9.	, 1, 2008 Fee	MANAGING MEMBER COSEMARY J	RS/MANAGERS	TITLE	1		Florida	Departme	ent of State	
9. TITLE NAME	, 1, 2008 Fee , MGR , HOBERTO, R 713 EGLIN PI	MANAGING MEMBER COSEMARY J KWY., NE	RS/MANAGERS	TITLE NAME STREE	E		Florida	Departme	ent of State	
9. TITLE MAKE STREET ADDRESS CITY-ST-ZIP	, 1, 2008 Fee , MGR , HOBERTO, R 713 EGLIN PI	MANAGING MEMBER COSEMARY J	RS/MANAGERS	TITLE NAME STREE CITY	E ET ADORESS ·ST·ZIP		Florida	Departme	ont of State	Addition
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