

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

9/8/2008-90048-032-\$143.75-\$143.75

508 256 900546
FILED

DOCUMENT # L07000078854	
1. Entity Name SUN RAY POOL SERVICE, L.L.C.	



2008 DEC 16 PM 2:07

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business 3805 - 51ST TERRACE WEST BRADENTON, FL 34210	Mailing Address 3805 - 51ST TERRACE WEST BRADENTON, FL 34210
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2. Principal Place of Business - No P.O. Box # 3805 51ST TERRACE W	3. Mailing Address 3805 51ST TERRACE W
Suite, Apt. #, etc.	Suite, Apt. #, etc.



07092008 Chg-LLC CR2E083 (12/06)

City & State BRADENTON, FL	City & State BRADENTON, FL
Zip 34210	Zip 34210
County WALTON STARR	County WALTON STARR

4. FEI Number 83-0494156	Applied For Not Applicable
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5. Certificate of Status Desired ☒ \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent CARTER, JAMES D JR, ESQ 1111 THIRD AVENUE WEST RIVERVIEW CENTER, SUITE 150 BRADENTON, FL 34205	
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7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	
FL	Zip Code

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 _____ (NOTE: Registered Agent signature required when reappointing) DATE _____

**FILE NOW!! FEE IS \$138.75
Due by September 12, 2008**

In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Make check payable to
Florida Department of State

9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM WHITE, SANDREA R 3805 - 51ST TERRACE WEST BRADENTON, FL 34210 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

REINSTATEMENT - 08

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 Sandra R White 7/9/08
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #

C.L.