

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000083209

Entity Name: N. SUNSET LLC

FILED
Apr 02, 2008
Secretary of State

Current Principal Place of Business:

12682 ELLISON WILSON RD.
NORT PALM BEACH, FL 33408

New Principal Place of Business:

12682 ELLISON WILSON RD.
NORTH PALM BEACH, FL 33408

Current Mailing Address:

P.O. BOX 14901
NORTH PALM BEACH, FL 33408

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ERHART, JOHN J
12682 ELLISON WILSON RD.
NORT PALM BEACH, FL 33408 US

Name and Address of New Registered Agent:

ERHART, JOHN J
12682 ELLISON WILSON RD.
NORTH PALM BEACH, FL 33408 US

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:

04/02/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: ERHART, JOHN J
Address: P.O. BOX 14901
City-St-Zip: NORTH PALM BEACH, FL 33408

Title: MGR () Delete
Name: ERHART, JOHN J
Address: P.O. BOX 14901
City-St-Zip: NORTH PALM BEACH, FL 33408

ADDITIONS/CHANGES:

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

Title: MGR (X) Change () Addition
Name: ERHART, PAMELA L
Address: P.O. BOX 14901
City-St-Zip: NORTH PALM BEACH, FL 33408

I hereby certify that the information supplied with this filing does not qualify 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: JOHN J. ERHART

MGR

04/02/2008

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