

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Apr 29, 2008 8:00 am**  
**Secretary of State**

04-29-2008 90021 031 \*\*\*138.75

**DOCUMENT # L07000121904**

1. Entity Name  
**ALL SUN REALTY, LLC**



Principal Place of Business  
**400 ARTHUR GODFREY ROAD, SUITE 200  
MIAMI BEACH, FL 33140**

Mailing Address  
**400 ARTHUR GODFREY ROAD, SUITE 200  
MIAMI BEACH, FL 33140**



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

03182008 Chg-LLC CR2E083 (12/06)

4. FEI Number

☒ Applied For  
☐ Not Applied

5. Certificate of Status Desired ☐

**\$5.00** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**LAMONT NEIMAN INTERIAN & BELLET, P.A.  
ONE BISCAYNE TOWER, #3550  
TWO SOUTH BISCAYNE BLVD.  
MIAMI, FL 33131**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$138.75  
After May 1, 2008 Fee will be \$538.75**

**Make check payable to  
Florida Department of State**

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE MGR ☐ Delete  
NAME WOLMAN, PHILIP  
STREET ADDRESS 400 ARTHUR GODFREY ROAD, SUITE 200  
CITY-ST-ZIP MIAMI BEACH, FL 33140

TITLE ☐ Change ☐ Ad  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE MGR ☐ Delete  
NAME SHEPPARD, ERIC D  
STREET ADDRESS 400 ARTHUR GODFREY ROAD, SUITE 200  
CITY-ST-ZIP MIAMI BEACH, FL 33140

TITLE ☐ Change ☐ Ad  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE MGR ☐ Delete  
NAME WEDREN, WILLIAM  
STREET ADDRESS 400 ARTHUR GODFREY ROAD, SUITE 200  
CITY-ST-ZIP MIAMI BEACH, FL 33140

TITLE ☐ Change ☐ Ad  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Ad  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
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CITY-ST-ZIP

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TITLE ☐ Delete  
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CITY-ST-ZIP

TITLE ☐ Change ☐ Ad  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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:

*(Signature)* 4/24/08