

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000066089

Entity Name: SUNCOAST MUA, LLC

**FILED**  
**Mar 17, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

24945 US HWY 19N  
CLEARWATER, FL 33763

**New Principal Place of Business:**

**Current Mailing Address:**

24945 US HWY 19N  
CLEARWATER, FL 33763

**New Mailing Address:**

FEI Number: 26-3433661

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

WOLSTEIN, BRIAN DR.  
24945 US HWY 19N  
CLEARWATER, FL 33763 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: WOLSTEIN, BRIAN DR.  
Address: 24945 US HWY 19 N  
City-St-Zip: CLEARWATER, FL 33763

Title: MGRM  
Name: WOLSTEIN, DAVID G DR  
Address: 24945 US HWY 19N  
City-St-Zip: CLEARWATER, FL 33763

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: BRIAN WOLSTEIN

MGRM

03/17/2011

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