# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**
**Apr 23, 2012**
**Secretary of State**

DOCUMENT# L08000066089

**Entity Name:** SUNCOAST MUA, LLC

**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 Statues.

SIGNATURE: BRIAN WOLSTEIN MGR 04/23/2012

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