

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000066880

**FILED**  
**Apr 05, 2009**  
**Secretary of State**

**Entity Name:** SUN PROPERTY ADVISORS, LLC

**Current Principal Place of Business:**

2798 66TH STREET NORTH  
SAINT PETERSBURG, FL 33703

**New Principal Place of Business:**

1951 KENTUCKY AVE NE  
SAINT PETERSBURG, FL 33703 US

**Current Mailing Address:**

2798 66TH STREET NORTH  
SAINT PETERSBURG, FL 33710

**New Mailing Address:**

204 37 AVE N  
421  
SAINT PETERSBURG, FL 33703 US

FEI Number: 32-0276334

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

NAPLES, GERALD S  
2798 66TH STREET NORTH  
SAINT PETERSBURG, FL 33710 US

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

NAPLES, GERALD S  
1951 KENTUCKY AVE NE  
SAINT PETERSBURG, FL 33703 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: GERALD NAPLES

04/05/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: NAPLES, GERALD S  
Address: 1951 KENTUCKY AV NE  
City-St-Zip: SAINT PETERSBURG, FL 33703 US

**ADDITIONS/CHANGES:**

Title: PRES (X) Change ( ) Addition  
Name: NAPLES, GERALD S  
Address: 1951 KENTUCKY AV NE  
City-St-Zip: SAINT PETERSBURG, FL 33703 US

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: GERALD NAPLES

PRES

04/05/2009

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