

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000112309

FILED
Apr 29, 2009
Secretary of State

Entity Name: PRIME SUNSHINE PROPERTIES, LLC

Current Principal Place of Business:

13 SEAWARD CIR
PLACIDA, FL 33946

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 3789
PLACIDA, FL 33946

New Mailing Address:

FEI Number: 61-1574284 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FLYNN, SARAH
13 SEAWARD CIR
PLACIDA, FL 33946 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 () Delete
Name: FLYNN, BRANDON
Address: 13 SEAWARD CIR
City-St-Zip: PLACIDA, FL 33946

Title: MGRM () Delete
Name: BULLOK, KATHY
Address: 4213 MAGNOLIA DR
City-St-Zip: MCKINNEY, TX 75070

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

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

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

Title: MGRM () Change (X) Addition
Name: FLYNN, SARAH
Address: 13 SEAWARD CIR
City-St-Zip: PLACIDA, FL 33946

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: BRANDON FLYNN

MGRM

04/29/2009

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