

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L94000000039

FILED
Feb 25, 2005
Secretary of State

Entity Name: DIAMONDHEAD ISLAND BEACH RESORT, L.C.

Current Principal Place of Business:

6620 ESTERO BLVD.
FORT MYERS BEACH, FL 33931

New Principal Place of Business:

Current Mailing Address:

SUNSTREAM, INC.
6620 ESTERO BLVD.
FT. MYERS BEACH, FL 33931

New Mailing Address:

FEI Number: 65-0481300

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MONSRUD, MARY A
SUNSTREAM INC.
6620 ESTERO BLVD.
FT. MYERS, FL 33931 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/MEMBERS:

Title: MGRM () Delete
Name: SWANSON, ROBERT J
Address: 1125 S. FRONTAGE RD., SUITE 4
City-St-Zip: HASTINGS, MN 55033

Title: MGRM () Delete
Name: LAWRENCE, DAVID A
Address: 1125 S. FRONTAGE RD., SUITE 4
City-St-Zip: HASTINGS, MN 55033

Title: MGRM () Delete
Name: FLUEGEL, DONALD J
Address: 1303 S. FRONTAGE RD., #5
City-St-Zip: HASTINGS, MN 55033

Title: MGRM () Delete
Name: VOGEL, JAMES D
Address: 3936 TAMiami TRAIL N. STE. D
City-St-Zip: NAPLES, FL 33940

Title: MGRM () Delete
Name: GUSTAFSON, DONALD W
Address: 1125 S. FRONTAGE RD., SUITE 4
City-St-Zip: HASTINGS, MN 55033

Title: MGRM () Delete
Name: LAWRENCE, PAUL W
Address: 1125 S. FRONTAGE RD., SUITE 4
City-St-Zip: HASTINGS, MI 55033

ADDITIONS/CHANGES:

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

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

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: DAVID A LAWRENCE

MGRM

02/25/2005

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