

# **2011 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L98000000196

**FILED**  
**Jul 07, 2011**  
**Secretary of State**

**Entity Name:** SUNDY INN, L.C.

**Current Principal Place of Business:**

1180 SEMINOLE TRAIL  
SUITE 155  
CHARLOTTESVILLE, VA 22901

**New Principal Place of Business:**

**Current Mailing Address:**

1180 SEMINOLE TRAIL  
SUITE 155  
CHARLOTTESVILLE, VA 22901

**New Mailing Address:**

**FEI Number:** 65-0823780

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MORICK, SANDI  
615 SOUTH L STREET  
LAKE WORTH, FL 33460 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:** MGRP  
**Name:** GOODYEAR, KIMBERLY A  
**Address:** 1180 SEMINOLE TR, STE 155  
**City-St-Zip:** CHARLOTTESVILLE, VA 22901

**Title:** ST  
**Name:** COOKE, ROBERT  
**Address:** 1180 SEMINOLE TR, STE 155  
**City-St-Zip:** CHARLOTTESVILLE, VA 22901

**Title:** MGR  
**Name:** WORRELL JR, THOMAS E  
**Address:** 1180 SEMINOLE TR, STE 155  
**City-St-Zip:** CHARLOTTESVILLE, VA 22901

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:** KIMBERLY GOODYEAR

MGRP

07/07/2011

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