

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L98000001981

FILED
Mar 21, 2007
Secretary of State

Entity Name: SUN FUN & RETIREMENT, L.L.C.

Current Principal Place of Business:

2359 TWIN BAY VIEW
FORT WALTON BEACH, FL 32547

New Principal Place of Business:

Current Mailing Address:

2359 TWIN BAY VIEW
FORT WALTON BEACH, FL 32547

New Mailing Address:

FEI Number: 59-3538300

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FLEET, H. BART
FLEET, SPENCER, MARTIN & KILPATRICK, PA
1104 EGLIN PARKWAY
SHALIMAR, FL 325790000 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: MGR () Delete
Name: BLUMBERG, GAYLE
Address: 2359 TWIN BAY VIEW
City-St-Zip: FORT WALTON BEACH, FL 32547

Title: MGRM () Delete
Name: BLUMBERG, THEODORE MRS.
Address: 2960 OUTLOOK COURT
City-St-Zip: BEAVERCREEK, OH 45434

Title: MGRM () Delete
Name: WILSON, CHRISTOPHER J
Address: 6258 VISTA RIDGE
City-St-Zip: MADERIA, OH 45227

Title: MGRM () Delete
Name: WILSON, BETSY
Address: 6258 VISTA RIDGE
City-St-Zip: MADERIA, OH 45227

Title: MGRM () Delete
Name: BLUMBERG, LAWRENCE B
Address: 2359 TWIN BAY VIEW
City-St-Zip: FORT WALTON BEACH, FL 32547

Title: MGRM () Delete
Name: JONES, JOHN G
Address: 917 PRINCETON ROAD
City-St-Zip: TERRACE PARK, OH 45174

ADDITIONS/CHANGES:

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

Title: MGRM (X) Change () Addition
Name: JONES, STEPHANIE MRS.
Address: 917 PRINCETON ROAD
City-St-Zip: TERRACE PARK, OH 45174

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 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: GAYLE J. BLUMBERG

MGR

03/21/2007

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