

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L99000000018

FILED
Apr 25, 2005
Secretary of State

Entity Name: SUNSET COVE AT HOLMES BEACH, L.L.C.

Current Principal Place of Business:

13041 AUTOMOBILE BLVD.
CLEARWATER, FL 34622

New Principal Place of Business:

12406 WINDTREE BLVD
SEMINOLE, FL 33772

Current Mailing Address:

13041 AUTOMOBILE BLVD.
CLEARWATER, FL 34622

New Mailing Address:

12406 WINDTREE BLVD
SEMINOLE, FL 33772

FEI Number: 59-3555997

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ORNS, LONNIE T
13041 AUTOMOBILE BLVD.
CLEARWATER, FL 34622 US

Name and Address of New Registered Agent:

ORNS, LONNIE T
11050 9TH STREET EAST
TREASURE ISLAND, FL 33706 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:

04/25/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGR () Delete
Name: ORNS, LONNIE T
Address: 13041 AUTOMOBILE BLVD.
City-St-Zip: CLEARWATER, FL 34622

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

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: ORNS, LONNIE T
Address: 11050 9TH STREET EAST
City-St-Zip: TREASURE ISLAND, FL 33706

Title: MGR () Change (X) Addition
Name: KITENPLON, DAVID A
Address: 12406 WINDTREE BLVD
City-St-Zip: SEMINOLE, FL 33772

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 KITENPLON

MGR

04/25/2005

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