

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L99000005503

Entity Name: SUNSHINE LENDERS, LLC

FILED
May 01, 2009
Secretary of State

Current Principal Place of Business:

5801 SW 185 WAY
SOUTHWEST RANCHES, FL 33332

New Principal Place of Business:

Current Mailing Address:

5801 SW 185 WAY
SOUTHWEST RANCHES, FL 33332

New Mailing Address:

FEI Number: 65-0949114 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

ENRIQUEZ, STEPHEN C
15291 NW 60 AVE, #100
MIAMI LAKES, FL 33014 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: _____

Electronic Signature of Registered Agent

_____ Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: ENRIQUEZ, KELLY
Address: 5801 SW 185 WAY
City-St-Zip: SOUTHWEST RANCHES, FL 33332

Title: MGRM () Delete
Name: CHEETHAM, RICHARD
Address: 5801 SW 185 WAY
City-St-Zip: SOUTHWEST RANCHES, FL 33332

Title: MGRM () Delete
Name: ENRIQUEZ, STEPHEN
Address: 5801 SW 185 WAY
City-St-Zip: SOUTHWEST RANCHES, FL 33332

Title: MGRM () Delete
Name: TAMARA, DANIELI
Address: 5801 SW 185 WAY
City-St-Zip: SOUTHWEST RANCHES, FL 33332

Title: MGR () Delete
Name: PADRON, OSCAR
Address: 1 SE 3RD AVENUE, #1440
City-St-Zip: MIAMI, FL 33131

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

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

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

Title: MGR () Change (X) Addition
Name: DANIELI, JOSEPH
Address: 19451 SHERIDAN ST, #325
City-St-Zip: PEMBROKE PINES, FL 33332

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: STEPHEN ENRIQUEZ

MR

05/01/2009

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