2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L99000007520

1. Entity Name
SUNSET POINT, LLC



FILED
Jan 17, 2007 08:00 AM
Secretary of State

Principal Place of Business

2469 SUNSET POINT RD., #250 CLEARWATER, FL 33765

Mailing Address

2469 SUNSET POINT RD., #250 CLEARWATER, FL 33765



01032007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 59-3607152

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

Signature, typed or printed name of registered agent and title if applicable.

ROESCH, STEPHEN E 2469 SUNSET POINT RD., #250 CLEARWATER, FL 33765

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	The above named entity submits this statement for the purpose of changing its reg the obligations of registered agent,	stered office or registered agent, or both, in the State of Fiorida.	I am familiar with, and accept
SI	SIGNATURE		

(NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$50.00 Due by May 1, 2007

9.	MANAGING MEMBERS/MANAGERS
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM ZILLIG, DAVID A 2469 SUNSET POINT RD., #250 CLEARWATER, FL 33765
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM ROESCH, STEPHEN E 2469 SUNSET POINT RD., #250 CLEARWATER, FL 33765
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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:

JRE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING

DAVID A. ZIIIIG

1/11/07

727-797-7744

Date

Daytime Phone #