

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M06000001579

FILED
Jun 12, 2009
Secretary of State

Entity Name: SUNBELT DIVERSIFIED ENTERPRISES, LLC

Current Principal Place of Business:

2525 PONCE DE LEON BLVD #1080
CORAL GABLES, FL 33134

New Principal Place of Business:

2525 PONCE DE LEON BLVD #1080
CORAL GABLES, FL 33134

Current Mailing Address:

2525 PONCE DE LEON BLVD #1080
CORAL GABLES, FL 33134

New Mailing Address:

2525 PONCE DE LEON BLVD #1080
CORAL GABLES, FL 33134

FEI Number: 20-4411912 **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:

NICHOLS, ANNE
1221 BRICKELL AVE., STE 2660
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

CORPDIRECT AGENTS, INC.
515 EAST PARK AVENUE
TALLAHASSEE, FL 32301 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: KATIE WONSCH, ASSISTANT SECRETARY

06/12/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: SUNBELT CAPITAL PARTNERS LLC
Address: 1221 BRICKELL AVE., STE 2660
City-St-Zip: MIAMI, FL 33131

Title: CEO () Delete
Name: TOLZIEN, JAMES
Address: 2525 PONCE DE LEON BLVD #1080
City-St-Zip: CORAL GABLES, FL 33134

Title: VP () Delete
Name: PATRAKA, PETER
Address: 2525 PONCE DE LEON BLVD #1080
City-St-Zip: CORAL GABLES, FL 33134

Title: CFO () Delete
Name: PETERSON, SCOTT
Address: 2525 PONCE DE LEON BLVD #1080
City-St-Zip: CORAL GABLES, FL 33134

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:

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: SCOTT PETERSON

CFO

06/12/2009

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