**FILED** 

Mar 05, 2003 8:00 am Secretary of State

## 2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR

## **DOCUMENT # Z00609**

1. Entity Name

STREET ADDRESS

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CITY-ST-ZIP\*

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

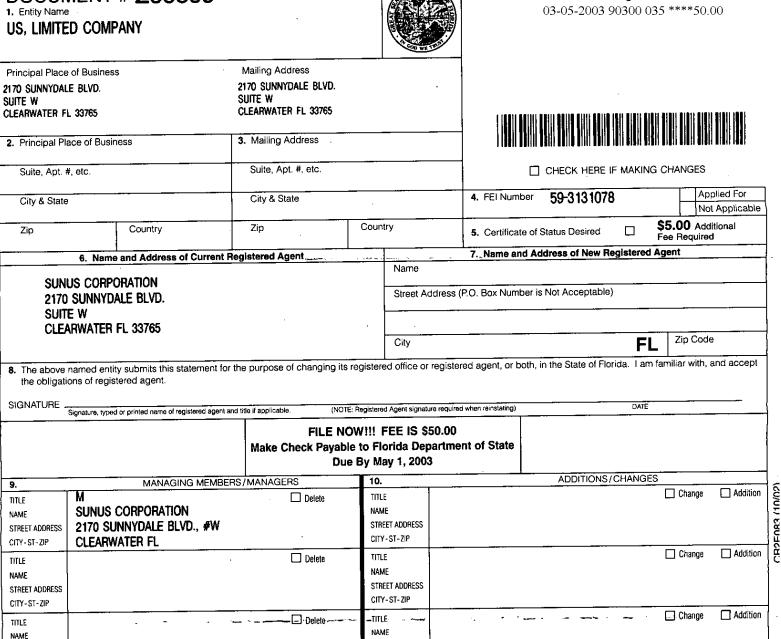
NAME

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CITY-ST-ZIP 11. I hereby certify that the information supplied with this filing does not qualify 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 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.

Alicia N. McCauley

STREET ADDRESS

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Sec Treas SUNUS Managing Member NTED NAME OF SIGNING MANAGING MEMBER MANAGER, OR AUTHORIZED REPRESENTATIVE

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