

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L03000042820

**Entity Name:** ALTURAS UTILITIES, L.L.C.

**FILED**  
**Feb 02, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

20 WEST TROPICAL WAY  
FT. LAUDERDALE, FL 33317

**New Principal Place of Business:**

**Current Mailing Address:**

20 WEST TROPICAL WAY  
FT. LAUDERDALE, FL 33317

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SHELDON, STUART  
20 W. TROPICAL WAY  
FT. LAUDERDALE, FL 33317 US

**Name and Address of New Registered Agent:**

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: MGM  
Name: SHELDON, STUART  
Address: 20 W TROPICAL WAY  
City-St-Zip: FT LAUDERDALE, FL 33317

I hereby 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: STUART SHELDON

MGM

02/02/2011

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