

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000056667

FILED  
Mar 10, 2012  
Secretary of State

Entity Name: DELA SOL BUILDERS, LLC

**Current Principal Place of Business:**

1527 NW 31ST AVENUE  
CAPE CORAL, FL 33993 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 13  
MATLACHA, FL 33993 US

**New Mailing Address:**

1527 NW 31ST AVENUE  
CAPE CORAL, FL 33993 US

FEI Number: 05-0623720

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

WALTON, CHARLES JR.  
1527 NW 31ST AVENUE  
CAPE CORAL, FL 33993 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: MGRM  
Name: WALTON, CHARLES JR.  
Address: 1527 NW 31ST AVENUE  
City-St-Zip: CAPE CORAL, FL 33993 US

Title: MGRM  
Name: BIROS, MIKE  
Address: P.O. BOX 8654  
City-St-Zip: FORT MYERS, FL 33908 US

Title: MGRM  
Name: DECOTIS, FRED JR.  
Address: 10350 WASHINGTONIA PALM WAY  
City-St-Zip: FORT MYERS, FL 33966 US

Title: MGRM  
Name: DECOTIS, SHARON S  
Address: 10350 WASHINGTONIA PALM WAY  
City-St-Zip: FORT MYERS, FL 33966 US

Title: MGRM  
Name: SOUSA, WILLIAM D  
Address: 582 AQUIDNECK AVENUE  
City-St-Zip: MIDDLETOWN, RI 02842 US

Title: MGRM  
Name: SOUSA, PAULINE M  
Address: 582 AQUIDNECK AVENUE  
City-St-Zip: MIDDLETOWN, RI 02842 US

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: CHARLES WALTON JR.

MGRM

03/10/2012

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