

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000032796

FILED  
Mar 02, 2009  
Secretary of State

Entity Name: 5712 WEST WATERS AVENUE, LLC

**Current Principal Place of Business:**

5712 W WATERS AVE  
TAMPA, FL 33634

**New Principal Place of Business:**

**Current Mailing Address:**

10103 TARPON SPRINGS ROAD  
ODESSA, FL 33556

**New Mailing Address:**

FEI Number: 68-0654240

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

PALOMINO, DIANA R  
10103 TARPON SPRINGS ROAD  
ODESSA, FL 33556 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 ( ) Delete  
Name: PALOMINO, DIANA R  
Address: 10103 TARPON SPRINGS ROAD  
City-St-Zip: ODESSA, FL 33556

Title: MGMR ( ) Delete  
Name: MIZZI, SHEILA D  
Address: 214 MCNALL ROAD  
City-St-Zip: FAIRFAX, VT 05454

**ADDITIONS/CHANGES:**

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: DIANA R. PALOMINO

MGRM

03/02/2009

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