

**2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000047127

**FILED**  
**Feb 07, 2012**  
**Secretary of State**

**Entity Name:** CASCADE FALLS REAL ESTATE LLC

**Current Principal Place of Business:**

14201 WEST SUNRISE BLVD.  
208  
SUNRISE, FL 33323

**New Principal Place of Business:**

**Current Mailing Address:**

14201 WEST SUNRISE BLVD.  
208  
SUNRISE, FL 33323

**New Mailing Address:**

**FEI Number:** 80-0408480      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

BISHOP, JASON  
14201 WEST SUNRISE BLVD.  
208  
SUNRISE, FL 33323 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:** PRES  
**Name:** BISHOP, JASON N PRES  
**Address:** 14201 W SUNRISE BLVD  
**City-St-Zip:** SUNRISE, FL 33323

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: JASON BISHOP      PRES      02/07/2012

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