

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L02000007909

**FILED**  
**Feb 01, 2010**  
**Secretary of State**

**Entity Name:** CROSSWINDS AT COUNTYLINE, LLC

**Current Principal Place of Business:**

5525 SW 41ST ST  
PEMBROKE PARK, FL 33023

**New Principal Place of Business:**

**Current Mailing Address:**

5525 SW 41ST STREET  
APT. #125  
PEMBROKE PARK, FL 33023 US

**New Mailing Address:**

5525 SW 41ST ST  
#125  
PEMBROKE PARK, FL 33023

**FEI Number:** 04-3679514

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ROSEN, FRANK  
5525 SW 41ST ST.  
APT. #125  
PEMBROKE PARK, FL 33023 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: ROSEN, FRANK  
Address: 5525 SW 41ST STREET, APT. #125  
City-St-Zip: PEMBROKE PARK, FL 33023

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: FRANK ROSEN

MGRM

02/01/2010

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