

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L02000030225

Entity Name: CINCO HERMANOS, LLC

**FILED**  
**Apr 14, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

C/O DAVID A. WALLACE  
200 SOUTH ORANGE AVENUE  
SARASOTA, FL 34236

**New Principal Place of Business:**

**Current Mailing Address:**

C/O DAVID A. WALLACE  
200 SOUTH ORANGE AVENUE  
SARASOTA, FL 34236

**New Mailing Address:**

FEI Number: 02-0652293

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

WALLACE, DAVID A  
200 SOUTH ORANGE AVENUE  
SARASOTA, FL 34236 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: MGR  
Name: WALLACE, DAVID A  
Address: 200 S. ORANGE AVE.  
City-St-Zip: SARASOTA, FL 34236 US

Title: MGR  
Name: WALLACE, JAMES P  
Address: 200 S. ORANGE AVE.  
City-St-Zip: SARASOTA, FL 34236 US

Title: MGR  
Name: WALLACE, JOHN R  
Address: 200 S. ORANGE AVE.  
City-St-Zip: SARASOTA, FL 34236 US

Title: MGR  
Name: WALLACE, THOMAS R  
Address: 200 S. ORANGE AVE.  
City-St-Zip: SARASOTA, FL 34236 US

Title: MGR  
Name: WALLACE, PETER R  
Address: 200 S. ORANGE AVE.  
City-St-Zip: SARASOTA, FL 34236 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: DAVID A. WALLACE

MGR

04/14/2011

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