

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000029466

FILED  
Jan 07, 2008  
Secretary of State

Entity Name: CINC, LLC

**Current Principal Place of Business:**

1615 S. MILLS AVENUE  
ORLANDO, FL 32806

**New Principal Place of Business:**

1224 WATERWITCH COVE CIRCLE  
ORLANDO, FL 32806

**Current Mailing Address:**

1615 S. MILLS AVENUE  
ORLANDO, FL 32806

**New Mailing Address:**

1224 WATERWITCH COVE CIRCLE  
ORLANDO, FL 32806

FEI Number: 20-0986051

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

DAVIDSON, CHARLES M  
1615 S. MILLS AVE  
ORLANDO, FL 32806 US

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

DAVIDSON, CHARLES M  
1224 WATERWITCH COVE CIRCLE  
ORLANDO, FL 32806 US

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: \_\_\_\_\_

01/07/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: DAVIDSON, CHARLES M  
Address: 1615 S. MILLS AVENUE  
City-St-Zip: ORLANDO, FL 32806

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: DAVIDSON, CHARLES M  
Address: 1224 WATERWITCH COVE CIRCLE  
City-St-Zip: ORLANDO, FL 32806

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: CHARLES M. DAVIDSON

MGR

01/07/2008

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