

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000040702

**FILED**  
**Jan 04, 2011**  
**Secretary of State**

**Entity Name:** COWINS FAMILY PROPERTIES, LLC

**Current Principal Place of Business:**

2204 ALI BABA AVE  
OPA LOCKA, FL 33054 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 541156  
OPA-LOCKA, FL 33054 US

**New Mailing Address:**

2204 ALI BABA AVE  
OPA LOCKA, FL 33054 US

**FEI Number:** 20-1228630

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

COWINS, BILLY  
1718 NW 153 ST  
MIAMI GARDENS, FL 33054 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:** COWINS, BILLY  
**Address:** 1718 NW 153 ST  
**City-St-Zip:** MIAMI GARDENS, FL 33054

**Title:** MGR  
**Name:** KEYSER, JOYCE  
**Address:** 20837 NW 9 CT #108  
**City-St-Zip:** MIAMI, FL 33169 US

**Title:** MGR  
**Name:** KEITH, COWINS  
**Address:** 1718 NW 153 ST  
**City-St-Zip:** MIAMI GARDENS, FL 33054 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:** BCC

MGRM

01/04/2011

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