

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000048516

Entity Name: NEWINDS, LLC

FILED  
Jan 08, 2009  
Secretary of State

**Current Principal Place of Business:**

138 30TH TERRACE  
CAPE CORAL, FL 33904

**New Principal Place of Business:**

**Current Mailing Address:**

138 30TH TERRACE  
CAPE CORAL, FL 33904

**New Mailing Address:**

FEI Number: 20-1307734

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

FERNANDEZ, EDUARDO ESQ  
4100 SW 57TH AVENUE  
SOUTH MIAMI, FL 33155 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 ( ) Delete  
Name: CALVO DE BARBERO, PATRICIA S  
Address: 138 30TH TERRACE  
City-St-Zip: CAPE CORAL, FL 33904

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MGR ( ) Change (X) Addition  
Name: BARBERO, ALBERTO J  
Address: 138 SE 30TH TERRACE  
City-St-Zip: CAPE CORAL, FL 33904

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: ALBERTO BARBERO

MGR

01/08/2009

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