

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000065399

Entity Name: GABLES SUNVIEW, LLC

**FILED**  
**Apr 14, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

2533 SW 19 AVENUE  
SUITE 400  
COCONUT GROVE, FL 33133

**New Principal Place of Business:**

**Current Mailing Address:**

2533 SW 19 AVENUE  
SUITE 400  
COCONUT GROVE, FL 33133

**New Mailing Address:**

FEI Number: 13-4286942

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SILVIA, OVADIA  
2533 SW 19 AVENUE  
SUITE 400  
COCONUT GROVE, FL 33133 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: VILLAR, PEDRO  
Address: 2533 SW 19 AVENUE, SUITE 400  
City-St-Zip: COCONUT GROVE, FL 33134

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: PEDRO VILLAR

MGR

04/14/2010

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