

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Apr 09, 2007 8:00 am**  
**Secretary of State**

04-09-2007 90346 001 \*\*\*\*50.00

60033950



03282007 Chg-LLC CR2E083 (12/06)

4. FEI Number 20-1875786 Applied For Not Applicable

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

DOCUMENT # L05000079526

1. Entity Name  
CAMINO REAL CENTRE, LLC



Principal Place of Business  
600 BRICKELL AVENUE, #800  
MIAMI, FL 33133

Mailing Address  
600 BRICKELL AVENUE, #800  
MIAMI, FL 33133

2. Principal Place of Business - No P.O. Box #

777 Brickell Avenue

Suite, Apt. #, etc.

Suite 808

City & State

Miami, FL

Zip

33131

Country

USA

3. Mailing Address

777 Brickell Avenue

Suite, Apt. #, etc.

Suite 808

City & State

Miami, FL

Zip

33131

Country

USA

6. Name and Address of Current Registered Agent

SEVILLA, CHARLOTTE R  
600 BRICKELL AVE  
STE 800  
MIAMI, FL 33131

7. Name and Address of New Registered Agent

Name Loretta Cockrum

Street Address (P.O. Box Number is Not Acceptable)

777 Brickell Avenue

Suite 808

City

Miami

FL

Zip Code

33131

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

*Loretta Cockrum*

Loretta Cockrum

3/29/07

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

Filing Fee is \$50.00  
Due by May 1, 2007

Make check payable to  
Florida Department of State

9. MANAGING MEMBERS / MANAGERS

TITLE MGR  
NAME SHERLON INVESTMENTS, LLC  
STREET ADDRESS 600 BRICKELL AVENUE, #800  
CITY-ST-ZIP MIAMI, FL 33133 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

10. ADDITIONS / CHANGES

TITLE  
NAME  
STREET ADDRESS 777 Brickell Ave., suite 808  
CITY-ST-ZIP Miami, FL 33131 ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:

*Loretta Cockrum*

Loretta Cockrum

Date

3/29/07 305-358-9807

Daytime Phone #