

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000103845

**FILED**  
**Apr 27, 2010**  
**Secretary of State**

**Entity Name:** FURLO, BOSS, VALDES INVESTMENTS, LLC

**Current Principal Place of Business:**

10796 BRANTLY ROAD  
O'BRIEN, FL 32071

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 185  
O'BRIEN, FL 32071

**New Mailing Address:**

**FEI Number:** 20-3713465

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FURLO, KATHY  
10796 BRANTLEY ROAD  
O'BRIEN, FL 32071 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: FURLO, WILLIAM T  
Address: PO BOX 185  
City-St-Zip: O'BRIEN, FL 32071

Title: MGR  
Name: FURLO, KATHY  
Address: PO BOX 185  
City-St-Zip: O'BRIEN, FL 32071

Title: MGRM  
Name: BOSS, THOMAS  
Address: PO BOX 185  
City-St-Zip: O'BRIEN, FL 32071

Title: MGRM  
Name: BOSS, AMBER  
Address: PO BOX 185  
City-St-Zip: O'BRIEN, FL 32071

Title: MGRM  
Name: VALDES, OSCAR  
Address: PO BOX 185  
City-St-Zip: O'BRIEN, FL 32071

Title: MGRM  
Name: VALDES, JENNIE  
Address: PO BOX 185  
City-St-Zip: O'BRIEN, FL 32071

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: KATHY FURLO

MGR

04/27/2010

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