

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000115437

Entity Name: CW TWIN CREEKS, LLC

**FILED**  
**Jun 16, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

8655 S. PRIEST DR.  
TEMPE, AZ 85284

**New Principal Place of Business:**

**Current Mailing Address:**

8655 S. PRIEST DR.  
TEMPE, AZ 85284

**New Mailing Address:**

8655 S. PRIEST DR.  
TEMPE, AZ 85284

FEI Number: 20-3928813

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

NRAI SERVICES, INC.  
2731 EXECUTIVE PARK DRIVE, SUITE 4  
WESTON, FL 33331 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: CORONADO WEST, INC.  
Address: 8655 S. PRIEST DR.  
City-St-Zip: TEMPE, AZ 85284

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: JOHN CORK

PRES

06/16/2010

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