

# 2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000084109

**FILED**  
**Jan 08, 2010**  
**Secretary of State**

**Entity Name:** FERRENTINO INVESMENTS, LLC

**Current Principal Place of Business:**

5110 BLUEBERRY ACRES  
DELEON SPRINGS, FL 32130

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 1116  
DELEON SPRINGS, FL 32130

**New Mailing Address:**

**FEI Number:** 20-5679265

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FERRENTINO, PETER  
5110 BLUEBERRY ACRES  
DELEON SPRINGS, FL 32130 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: MGRM  
Name: FERRENTINO, PETER  
Address: P.O. BOX 1116  
City-St-Zip: DELEON SPRINGS, FL 32130

Title: TRES  
Name: OUTZEN, PAUL  
Address: P.O. BOX 1218  
City-St-Zip: DE LEON SPRINGS, FL 32130

Title: SEC  
Name: OUTZEN, PAULA  
Address: P.O. BOX 1116  
City-St-Zip: DE LEON SPRINGS, FL 32130

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: PETER FERRENTINO

MGRM

01/08/2010

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