

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000009001

**FILED**  
**Mar 02, 2012**  
**Secretary of State**

**Entity Name:** CINDY'S CASUAL CUISINE LLC

**Current Principal Place of Business:**

1516 MAX HOOKS RD.  
SUITE A  
GROVELAND, FL 34736

**New Principal Place of Business:**

**Current Mailing Address:**

420 5TH STREET  
CLERMONT, FL 34711

**New Mailing Address:**

495 CARROLL ST  
CLERMONT, FL 34711

**FEI Number:** 32-0281225

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GORE, CINDY  
420 5TH  
CLERMONT, FL 34711 US

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

GORE, CINDY  
495 CARROLL ST  
CLERMONT, FL 34711 US

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:** CINDY GORE

03/02/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGRM  
**Name:** GORE, CINDY  
**Address:** 495 CARROLL ST  
**City-St-Zip:** CLERMONT, FL 34711

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:** CINDY GORE

OWNE

03/02/2012

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