

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000009162

**FILED**  
**Mar 14, 2011**  
**Secretary of State**

**Entity Name:** SINCERE PROPERTY SOLUTIONS, LLC

**Current Principal Place of Business:**

1139 O'DAY DRIVE  
WINTER SPRINGS, FL 32708

**New Principal Place of Business:**

1139 O'DAY DRIVE  
WINTER SPRINGS, FL 32708 US

**Current Mailing Address:**

P O BOX 195004  
WINTER SPRINGS, FL 32719

**New Mailing Address:**

**FEI Number:** 26-1811234      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

KLINSHAW, CATHERINE Y  
1139 O'DAY DRIVE  
WINTER SPRINGS, FL 32708 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:** KLINSHAW, CATHERINE Y  
**Address:** P O BOX 195004  
**City-St-Zip:** WINTER SPRINGS, FL 32719

**Title:** MGRM  
**Name:** KLINSHAW, JOSEPH  
**Address:** P O BOX 195004  
**City-St-Zip:** WINTER SPRINGS, FL 32719

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: JOSEPH KLINSHAW

MGRM

03/14/2011

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