

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000027944

**FILED**  
**Apr 28, 2009**  
**Secretary of State**

**Entity Name:** RINALDI AT 522, LLC

**Current Principal Place of Business:**

14609 JOSAIR DRIVE  
ORLANDO, FL 32826

**New Principal Place of Business:**

14512 JOSAIR DRIVE  
ORLANDO, FL 32826

**Current Mailing Address:**

20 NORTH ORANGE AVENUE, STE. 600  
ORLANDO, FL 32801

**New Mailing Address:**

14512 JOSAIR DRIVE  
ORLANDO, FL 32826

FEI Number: 26-2208440

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

HENDRY, STONER, CALANDRINO & BROWN, PA  
20 N. ORANGE AVENUE, STE. 600  
ORLANDO, FL 32801 US

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

RINANLDI, CARLOS MANAGER  
20 N. ORANGE AVENUE, STE. 600  
ORLANDO, FL 32826 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: RINALDI, CARLOS

04/28/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: PS ( ) Delete  
Name: RINALDI, CARLOS  
Address: 14609 JOSAIR DRIVE  
City-St-Zip: ORLANDO, FL 32826

**ADDITIONS/CHANGES:**

Title: PS (X) Change ( ) Addition  
Name: RINALDI, CARLOS  
Address: 14512 JOSAIR DRIVE  
City-St-Zip: ORLANDO, FL 32826

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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: RINALDI, CARLOS

PS

04/28/2009

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