

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000003057

Entity Name: CINCO SOLES LLC

**FILED**  
**Apr 24, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

13750 BLUEBIRD POND ROAD  
WINDERMERE, FL 34786 US

**New Principal Place of Business:**

**Current Mailing Address:**

13750 BLUEBIRD POND ROAD  
WINDERMERE, FL 34786 US

**New Mailing Address:**

FEI Number: 26-4324824

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

POSADA, RODRIGO  
6991 WEST BROWARD BLVD  
SUITE 104  
PLANTATION, FL 33317 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: MRS  
Name: POSADA, OLIVA  
Address: 3156 RIVER BRANCH CIRCLE  
City-St-Zip: KISSIMMEE, FL 34741

Title: MS  
Name: PALOW, IRENE  
Address: 13750 BLUEBIRD POND RD.  
City-St-Zip: WINDEMERE, FL 34786

Title: MS  
Name: GOEDE, MARIA  
Address: 413 MICHIGAN AVENUE  
City-St-Zip: NORFOLK, NE 68701

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: MARIA GOEDE

MS

04/24/2010

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