

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000090325

Entity Name: E.R.WINN LLC

**FILED**  
**Apr 24, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

1090 KANE CONCOURSE  
BAY HARBOR ISLANDS, FL 33154 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 8174  
FT. LAUDERDALE, FL 33310 US

**New Mailing Address:**

FEI Number: 27-3391574

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

TRUTE, MELVYN  
1090 KANE CONCOURSE  
BAY HARBOR ISLANDS, FL 33310 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: SMITH, RAYMOND  
Address: PO BOX 8174  
City-St-Zip: FT. LAUDERDALE, FL 33310 US

Title: MGRM  
Name: SMITH, JOHN  
Address: PO BOX 8174  
City-St-Zip: FT. LAUDERDALE, FL 33310 US

Title: MGRM  
Name: SMITH, ALAN  
Address: PO BOX 8174  
City-St-Zip: FT. LAUDERDALE, FL 33310 US

Title: MGRM  
Name: LEGATTI, THERESA  
Address: 930 14TH AVENUE SW  
City-St-Zip: LARGO, FL 33770 US

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: THERESA LEGATTI

MGRM

04/24/2011

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