

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000035801

**Entity Name:** SPARROW DESIGNS, LLC

**Current Principal Place of Business:**

3319 OAK VISTA DR  
PORT ORANGE, FL 32128

**Current Mailing Address:**

3319 OAK VISTA DR  
PORT ORANGE, FL 32128

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

MCCAULEY, ANNA  
3319 OAK VISTA DR  
PORT ORANGE, FL 32128 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Authorized Person(s) Detail :**

Title            PRES  
Name            MCCAULEY, ANNEL  
Address        3319 OAK VISTA DR  
City-State-Zip: PORT ORANGE FL 32128

*I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** ANNEL MCCAULEY

**PRESIDENT**

**03/01/2017**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date