

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L00000006351

Entity Name: STYLES 2000, L.L.C.

**FILED**  
**Feb 17, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

4650 CLEVELAND AVE  
STE 2B  
FT MYERS, FL 33907

**New Principal Place of Business:**

**Current Mailing Address:**

4650 CLEVELAND AVE  
STE 2B  
FT MYERS, FL 33907

**New Mailing Address:**

FEI Number: 65-1012721

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

REDA, CATHERINE A  
13250 FIRST STREET  
FORT MYERS, FL 33905 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: MMBR  
Name: REDA, CATHERINE A  
Address: 13250 FIRST STREET  
City-St-Zip: FORT MYERS, FL 33905

Title: MMBR  
Name: LYONS, LORI L  
Address: 29 VICTORIA DRIVE  
City-St-Zip: NORTH FORT MYERS, FL 33917

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: CATHERINE REDA

MEMB

02/17/2012

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