## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L02000017129

Entity Name: RON WHITTEN WOOD DESIGNS, LLC

FILED Apr 09, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

4120 ENTERPRISE AVE., STE 110 4120 ENTERPRISE AVE., STE 110 NAPLES, FL 341047086 NAPLES, FL 341047086 US

**Current Mailing Address: New Mailing Address:** 

4120 ENTERPRISE AVE., STE 110 NAPLES, FL 341047086

FEI Number: 14-1849631 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

FELDEN, CHRISTIAN B ESQ. 3838 TAMIAMI TRAIL N. SUITE 416 NAPLES, FL 34103

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: ADDITIONS/CHANGES:

MGRM Title: () Delete (X) Change ( ) Addition

WHITTEN, RON WHITTEN, RON Name: Name: Address: 2 TINA LANE #233 Address: 4120 ENTERPRISE AVE #110

City-St-Zip: NAPLES, FL 341043906 City-St-Zip: NAPLES, FL 34104

(X) Change ( ) Addition Title: MGRM () Delete Title: MGRM Name: WHITTEN, KRIS Name: WHITTEN, KRIS

Address: 2 TINA LANE #233 Address: 4120 ENTERPRISE AVE #110

City-St-Zip: NAPLES, FL 341043906 City-St-Zip: NAPLES, FL 34104

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: KRIS WHITTEN **MGRM** 04/09/2009