

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L02000017129

**FILED**  
**Mar 23, 2010**  
**Secretary of State**

**Entity Name:** RON WHITTEN WOOD DESIGNS, LLC

**Current Principal Place of Business:**

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

**New Principal Place of Business:**

**Current Mailing Address:**

4120 ENTERPRISE AVE., STE 110  
NAPLES, FL 341047086

**New Mailing Address:**

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

**FEI Number:** 14-1849631

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FELDEN, CHRISTIAN B ESQ.  
3838 TAMIAMI TRAIL N. SUITE 416  
NAPLES, FL 34103 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: WHITTEN, RON  
Address: 4120 ENTERPRISE AVE #110  
City-St-Zip: NAPLES, FL 34104

Title: MGRM  
Name: WHITTEN, KRIS  
Address: 4120 ENTERPRISE AVE #110  
City-St-Zip: NAPLES, FL 34104

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: KRIS WHITTEN

MGRM

03/23/2010

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