

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000027455

FILED
Jan 19, 2009
Secretary of State

Entity Name: DESIGN DEVELOPMENT - WATERCOLOURS MARKET LLC

Current Principal Place of Business:

1507 BAYWOODS ROAD
GULF BREEZE, FL 32563 US

New Principal Place of Business:

Current Mailing Address:

1507 BAYWOODS ROAD
GULF BREEZE, FL 32563 US

New Mailing Address:

FEI Number: 45-0488220

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOLMAN, SUZANNE W
1507 BAYWOODS ROAD
GULF BREEZE, FL 32563 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 () Delete
Name: HOLMAN, SUZANNE W
Address: 1507 BAYWOODS ROAD
City-St-Zip: GULF BREEZE, FL 32563

Title: MGRM () Delete
Name: HOLMAN, WILLIAM P
Address: 2513 ROSEDOWN DRIVE
City-St-Zip: CANTONMENT, FL 32533

Title: MGRM () Delete
Name: MARCUS, ROBERT M
Address: 2388 W. BAYSHORE
City-St-Zip: GULF BREEZE, FL 32561

Title: MGRM () Delete
Name: SANDERS, JOHN P
Address: 10205 HOLSBERRY RD.
City-St-Zip: PENSACOLA, FL 32534

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGRM (X) Change () Addition
Name: HOLMAN, WILLIAM P
Address: 405 SOUTH 2ND STREET
City-St-Zip: PENSACOLA, FL 32507

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: SUZANNE HOLMAN

MGRM

01/19/2009

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