

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L02000027455

**FILED**  
**Apr 26, 2010**  
**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:**

1507 PALAFOX STREET  
PENSACOLA, FL 32501 US

**Current Mailing Address:**

1507 BAYWOODS ROAD  
GULF BREEZE, FL 32563 US

**New Mailing Address:**

P.O BOX 13647  
PENSACOLA, FL 32591 US

**FEI Number:** 45-0488220

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HOLMAN, WILLIAM  
405 SOUTH 2ND ST.  
PENSACOLA, FL 32507 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: HOLMAN, SUZANNE W  
Address: 1507 BAYWOODS ROAD  
City-St-Zip: GULF BREEZE, FL 32563

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

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

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

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: WILLIAM P HOLMAN

MGRM

04/26/2010

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