

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000004209

Entity Name: O'GUIN DECORATIVE ARTS, L.L.C.

FILED
Apr 01, 2008
Secretary of State

Current Principal Place of Business:

5650 YAHL STREET, STE. 4
NAPLES, FL 34109

New Principal Place of Business:

1786 TRADE CENTER WAY
SUITE 4
NAPLES, FL 34109

Current Mailing Address:

5650 YAHL STREET, STE. 4
NAPLES, FL 34109

New Mailing Address:

1786 TRADE CENTER WAY
SUITE 4
NAPLES, FL 34109

FEI Number: 20-0606006

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

O'GUIN, CHRISTOPHER M
10805 QUEEN ANNE LANE
NAPLES, FL 34109 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: MGR () Delete
Name: O'GUIN, CHRISTOPHER
Address: 10805 QUEEN ANNE LANE
City-St-Zip: NAPLES, FL 34109

Title: MGRM () Delete
Name: O'GUIN, MICHAEL W
Address: 1220 COMMONWEALTH CR., M206
City-St-Zip: NAPLES, FL 34116

Title: MGRM () Delete
Name: O'GUIN, LIZBETH L
Address: 1220 COMMONWEALTH CR., M206
City-St-Zip: NAPLES, FL 34116

Title: MGRM () Delete
Name: O'GUIN, CORY P
Address: 4680 ST. CROIX LN., # 524
City-St-Zip: NAPLES, FL 34109

ADDITIONS/CHANGES:

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

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

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: LIZBETH L O'GUIN

MGRM

04/01/2008

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