

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000004209

**FILED**  
**Mar 13, 2012**  
**Secretary of State**

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

**Current Principal Place of Business:**

1786 TRADE CENTER WAY  
SUITE 4  
NAPLES, FL 34109

**New Principal Place of Business:**

**Current Mailing Address:**

1786 TRADE CENTER WAY  
SUITE 4  
NAPLES, FL 34109

**New Mailing Address:**

**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, LIZBETH L  
7840 CLEMSON ST.  
202  
NAPLES, FL 34104 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  
**Name:** O'GUIN, CHRISTOPHER  
**Address:** 7840 CLEMSON ST, 201  
**City-St-Zip:** NAPLES, FL 34104

**Title:** MGRM  
**Name:** O'GUIN, MICHAEL W  
**Address:** 7840 CLEMSON ST, 202  
**City-St-Zip:** NAPLES, FL 34104

**Title:** MGRM  
**Name:** O'GUIN, LIZBETH L  
**Address:** 7840 CLEMSON ST, 202  
**City-St-Zip:** NAPLES, FL 34104

**Title:** MGRM  
**Name:** O'GUIN, CORY P  
**Address:** 3515 AVION WOODS CT., 801  
**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:** LIZBETH O'GUIN

MGRM

03/13/2012

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