

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000047801

**FILED**  
**Jan 06, 2011**  
**Secretary of State**

**Entity Name:** WEEPING WILLOW DEVELOPMENT OF SW FLORIDA, LLC

**Current Principal Place of Business:**

11300 LINDBERGH BLVD.  
103  
FORT MYERS, FL 33913

**New Principal Place of Business:**

**Current Mailing Address:**

13300-56 S. CLEVELAND AVE  
PMB 236  
FORT MYERS, FL 33907

**New Mailing Address:**

**FEI Number:** 90-0177126

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

OWENS, BRIAN  
11300 LINDBERGH BLVD.  
103  
FORT MYERS, FL 33913 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: OWENS, BRIAN  
Address: 11300 LINDBERGH BLVD. , SUITE 103  
City-St-Zip: FORT MYERS, FL 33913

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: BRIAN OWENS

MGRM

01/06/2011

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