

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000001762

**FILED**  
**Jan 05, 2010**  
**Secretary of State**

**Entity Name:** TROPICAL DESIGNS OF MARCO, L.L.C.

**Current Principal Place of Business:**

8870 LELY ISLAND BLVD.  
NAPLES, FL 34113

**New Principal Place of Business:**

**Current Mailing Address:**

8870 LELY ISLAND BLVD.  
NAPLES, FL 34113

**New Mailing Address:**

**FEI Number:** 30-0292707

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WEBSTER, RONALD S  
985 NORTH COLLIER BOULEVARD  
MARCO ISLAND, FL 34145 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:** COURTER, STACY G  
**Address:** 8870 LELY ISLAND BLVD.  
**City-St-Zip:** NAPLES, FL 34113

**Title:** MGRM  
**Name:** COURTER, CAROL  
**Address:** 8870 LELY ISLAND BLVD.  
**City-St-Zip:** NAPLES, FL 34113

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:** STACY G COURTER

MR

01/05/2010

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