

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000022632

**FILED**  
**Apr 27, 2011**  
**Secretary of State**

**Entity Name:** CHESTERFIELD DESIGN, LLC

**Current Principal Place of Business:**

132 WEST AVENUE A  
KEY LARGO, FL 33037

**New Principal Place of Business:**

**Current Mailing Address:**

132 WEST AVENUE A  
KEY LARGO, FL 33037

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

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

WINKER, DAVID J ESQ.  
999 PONCE DE LEON BLVD., PENTHOUSE 1110  
CORAL GABLES, FL 33134 US

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

WINKER, DAVID J ESQ.  
312 MINORCA AVE  
CORAL GABLES, FL 33134 US

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:

04/27/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MR  
Name: CHESTERFIELD, JULIAN A PRES  
Address: 132 WEST AVENUE A  
City-St-Zip: KEY LARGO, FL 33037

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: JULIAN A CHESTERFIELD

PRES

04/27/2011

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