

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000086901

FILED
Mar 25, 2009
Secretary of State

Entity Name: INNOVATIVE DESIGN CENTER, LLC

Current Principal Place of Business:

1227 STOVER CT.
HOLIDAY, FL 34691 US

New Principal Place of Business:

Current Mailing Address:

1227 STOVER CT.
HOLIDAY, FL 34691 US

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:

WARD, THERESA A
1227 STOVER COURT
HOLIDAY, FL 34691 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 () Delete
Name: WARD, THERESA A
Address: 1227 STOVER COURT
City-St-Zip: HOLIDAY, FL 34691 US

ADDITIONS/CHANGES:

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: THERESA WARD

MGR

03/25/2009

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