

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000105265

**FILED**  
**Jan 08, 2010**  
**Secretary of State**

**Entity Name:** FLAIR ONE, LLC

**Current Principal Place of Business:**

5802A EAST FOWLER AVENUE  
SUITE 121  
TEMPLE TERRACE, FL 33617

**New Principal Place of Business:**

**Current Mailing Address:**

5802A EAST FOWLER AVENUE  
SUITE 121  
TEMPLE TERRACE, FL 33617

**New Mailing Address:**

**FEI Number:** 56-2539836

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LANIGAN, DAVID C JD, LLM  
DAVID LANIGAN P.A.  
10927 NORTH 56TH STREET  
TAMPA, FL 336173000 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:** WILLIAMS, WALTER F  
**Address:** 5903 SOARING AVENUE  
**City-St-Zip:** TEMPLE TERRACE, FL 33617

**Title:** MGR  
**Name:** WILLIAMS, WALLACE F  
**Address:** 11404 TULLAMORE PLACE  
**City-St-Zip:** TEMPLE TERRACE, FL 33617

**Title:** MGR  
**Name:** WILLIAMS, MARLENE M  
**Address:** 11404 TULLAMORE PLACE  
**City-St-Zip:** TEMPLE TERRACE, FL 33617

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:** WALTER WILLIAMS

MGR

01/08/2010

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