

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000122453

Entity Name: FLAIR TWO, LLC

**FILED**  
**Apr 26, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

5802-A EAST FOWLER AVE., SUITE 121  
TEMPLE TERRACE, FL 33617

**New Principal Place of Business:**

11405 TULLAMORE PL  
TEMPLE TERRACE, FL 33617

**Current Mailing Address:**

5802-A EAST FOWLER AVE., SUITE 121  
TEMPLE TERRACE, FL 33617

**New Mailing Address:**

FEI Number: 72-1688608

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

LANIGAN, DAVID C JD, LLM  
C/O DAVID LANIGAN, P.A.  
10927 NORTH 56TH STREET  
TAMPA, FL 336173000 US

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

WILLIAMS, WALT F  
11045 TULLAMORE PL  
TEMPLE TERRACE, FL 33617 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: WALT WILLIAMS

04/26/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: SQUARE W HOLDINGS, LLC  
Address: 11404 TULLAMORE PLACE  
City-St-Zip: TEMPLE TERRACE, FL 33617

Title: MGR  
Name: WILLIAMS, WALLACE  
Address: 11405 TULLAMORE PL  
City-St-Zip: TEMPLE TERRACE, FL 33617

Title: MGR  
Name: WILLIAMS, WALT F  
Address: 11405 TULLAMORE PL  
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: WALT WILLIAMS

MGR

04/26/2011

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