

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000021728

Entity Name: CONCEPTS IN DESIGN, LLC

FILED
Apr 03, 2009
Secretary of State

Current Principal Place of Business:

8870 COLONNADES CT. WEST
SUITE 336
BONITA SPRINGS, FL 34135

Current Mailing Address:

PO BOX 368167
BONITA SPRINGS, FL 34136

New Principal Place of Business:

28200 OLD 41 RD
UNIT 204
BONITA SPRINGS, FL 34135

New Mailing Address:

28200 OLD 41 RD
UNIT 204
BONITA SPRINGS, FL 34135

FEI Number: 20-4417354

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ZELLA, JENNIFER A
8870 COLONNADES CT. WEST
SUITE 336
BONITA SPRINGS, FL 34135 US

Name and Address of New Registered Agent:

ZELLA, JENNIFER A
8870 COLONNADES CT. WEST
SUITE 332
BONITA SPRINGS, FL 34135 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: JENNIFER ZELLA

04/03/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: ZELLA, JENNIFER
Address: 8870 COLONNADES CT W #332
City-St-Zip: BONITA SPRINGS, FL 34135

Title: MGRM () Delete
Name: ZELLA, BARBARA
Address: 15547 MONTEROSSO LN. #201
City-St-Zip: NAPLES, FL 34110

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: JENNIFER ZELLA

MGRM

04/03/2009

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