

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000031187

FILED
Jul 02, 2007
Secretary of State

Entity Name: BILTMORE GARDENS DESIGN, LLC

Current Principal Place of Business:

1961 S MERRICK DRIVE
DELTONA, FL 32738

New Principal Place of Business:

Current Mailing Address:

1961 S MERRICK DRIVE
DELTONA, FL 32738

New Mailing Address:

FEI Number: 20-4519072 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

WAWRICK, DOROTHY
1961 S MERRICK DRIVE
DELTONA, FL 32738 US

Name and Address of New Registered Agent:

WAWRYCK, DOROTHY
1961 S MERRICK DRIVE
DELTONA, FL 32738 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: DOROTHY WAWRYCK

07/02/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: WAWRICK, MYRON
Address: 1961 S MERRICK DRIVE
City-St-Zip: DELTONA, FL 32738

Title: MGR () Delete
Name: WAWRICK, DOROTHY
Address: 1961 S MERRICK DRIVE
City-St-Zip: DELTONA, FL 32738

Title: MGR () Delete
Name: SATTERFIELD, PEGGY
Address: 1961 S MERRICK DRIVE
City-St-Zip: DELTONA, FL 32738

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: WAWRYCK, MYRON
Address: 1961 S MERRICK DRIVE
City-St-Zip: DELTONA, FL 32738

Title: MGR (X) Change () Addition
Name: WAWRYCK, DOROTHY
Address: 1961 S MERRICK DRIVE
City-St-Zip: DELTONA, FL 32738

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: DOROTHY WAWRYCK

MGR

07/02/2007

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