

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000032901

**FILED**  
**Mar 29, 2010**  
**Secretary of State**

**Entity Name:** WILLIAM F. ANDREWS DESIGN SOLUTIONS, L.L.C.

**Current Principal Place of Business:**

4721 NW 27TH AVENUE  
BOCA RATON, FL 33434

**New Principal Place of Business:**

**Current Mailing Address:**

4721 NW 27TH AVENUE  
BOCA RATON, FL 33434

**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:**

ANDREWS, WILLIAM F  
4721 NW 27TH AVENUE  
BOCA RATON, FL 33434 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  
Name: ANDREWS, WILLIAM F  
Address: 4721 NW 27TH AVENUE  
City-St-Zip: BOCA RATON, FL 33434

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: WILLIAM F. ANDREWS, MANAGING MEMBER

MR

03/29/2010

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