

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000059242

**FILED**  
**Feb 16, 2011**  
**Secretary of State**

**Entity Name:** WILLOWOOD HOME DESIGN, LLC

**Current Principal Place of Business:**

5201 TAMIAMI TRAIL N  
SUITE 1  
NAPLES, FL 34103

**New Principal Place of Business:**

**Current Mailing Address:**

5201 TAMIAMI TRAIL N  
SUITE 1  
NAPLES, FL 34103

**New Mailing Address:**

**FEI Number:** 20-5425179

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

VISSER, DOREEN J  
5201 TAMIAMI TRAIL N  
SUITE 1  
NAPLES, FL 34103 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:** VISSER, DOREEN J  
**Address:** 5201 TAMIAMI TR N, STE 1  
**City-St-Zip:** NAPLES, FL 34103

**Title:** MGRM  
**Name:** VISSER, RAYMOND R  
**Address:** 5201 TAMIAMI TRAIL N, STE 1  
**City-St-Zip:** NAPLES, FL 34103

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:** DOREEN VISSER

MGRM

02/16/2011

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