

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000083223

**Entity Name:** L. MICHELLE WOODS, LLC

**FILED**  
**Apr 24, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

3719 W. JEFFERSON ST.  
ORLANDO, FL 328051919

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 616866  
ORLANDO, FL 328616866

**New Mailing Address:**

**FEI Number:** 74-3186538

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WOODS, LENETTA M  
3719 W. JEFFERSON ST.  
ORLANDO, FL 328051919 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: MGR  
Name: WOODS, LENETTA M  
Address: P.O. BOX 616866  
City-St-Zip: ORLANDO, FL 328616866

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: LENETTA M. WOODS

MGR

04/24/2010

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