

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000102611

**FILED**  
**Jan 04, 2011**  
**Secretary of State**

**Entity Name:** HOME STAGING DESIGN PROS LLC

**Current Principal Place of Business:**

424 E. CENTRAL BLVD,  
196  
ORLANDO, FL 32801

**New Principal Place of Business:**

**Current Mailing Address:**

424 E. CENTRAL BLVD,  
196  
ORLANDO, FL 32801

**New Mailing Address:**

**FEI Number:** 20-8100513

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

FLETCHER, BRADLEY E  
530 E CENTRAL BLVD  
1002  
ORLANDO, FL 32804 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:** FLETCHER, BRADLEY E  
**Address:** 530 E CENTRAL BLVD. #1002  
**City-St-Zip:** ORLANDO, FL 32801

**Title:** MGRM  
**Name:** JOHNSON, JEFFREY L  
**Address:** 530 E. CENTRAL BLVD. #1002  
**City-St-Zip:** ORLANDO, FL 32801

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:** BRADLEY E FLETCHER

MGR

01/04/2011

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