# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

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

DOCUMENT# L07000067096

**Entity Name:** ANTIQUES ON WEST DEARBORN LLC

**Current Principal Place of Business:**

441 W DEARBORN ST
ENGLEWOOD, FL 34223 US

**New Principal Place of Business:**

**Current Mailing Address:**

441 W DEARBORN ST
ENGLEWOOD, FL 34223 US

**New Mailing Address:**

**FEI Number: 26-0366013** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

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

LOVENBERG, BETHIA M
441 W DEARBORN ST
ENGLEWOOD, FL 34223 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: LOVENBERG, BETHIA M
Address: 441 W DEARBORN ST
City-St-Zip: ENGLEWOOD, FL 34223 US

Title: MGR
Name: LOVENBERG, CARL G
Address: 441 W DEARBORN ST
City-St-Zip: ENGLEWOOD, FL 34223

Title: MGR
Name: HITCHINGHAM, AMIE E
Address: 1791 FAUN RD
City-St-Zip: VENICE, FL 34293

Title: MGR
Name: HITCHINGHAM, THOMAS W
Address: 1791 FAUN RD
City-St-Zip: VENICE, FL 34293

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 Statues.

SIGNATURE: BETHIA M. LOVENBERG MGRM 03/16/2011

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