

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000082383

FILED
Jan 23, 2009
Secretary of State

Entity Name: RED DOOR DISTINCTIVE REALTY, LLC

Current Principal Place of Business:

937 FOUNTAINHEAD DR.
DELTONA, FL 32725

New Principal Place of Business:

102 CEDAR SPRINGS CIRCLE
DEBARY, FL 32713

Current Mailing Address:

937 FOUNTAINHEAD DR.
DELTONA, FL 32725

New Mailing Address:

102 CEDAR SPRINGS CIRCLE
DEBARY, FL 32713

FEI Number: 26-0690782

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHAH, MILISSIA A
937 FOUNTAINHEAD DR.
DELTONA, FL 32725 US

Name and Address of New Registered Agent:

SHAH, MILISSIA A
102 CEDAR SPRINGS CIRCLE
DEBARY, FL 32713 US

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: MILISSIA A. SHAH

01/23/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: SHAH, MILISSIA A
Address: 937 FOUNTAINHEAD DR.
City-St-Zip: DELTONA, FL 32725

Title: MGR () Delete
Name: WISNIEWSKI, CHESTER W
Address: 63217 INDIAN HILLS
City-St-Zip: WASHINGTON, MI 48095

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: SHAH, MILISSIA A
Address: 102 CEDAR SPRINGS CIRCLE
City-St-Zip: DEBARY, FL 32713

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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: MILISSIA A. SHAH

MGR

01/23/2009

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