

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000087099

Entity Name: DOVE INTERIORS, L.L.C.

**FILED**  
**Mar 22, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

13103 FAULKNER PLACE  
RIVERVIEW, FL 33569

**New Principal Place of Business:**

**Current Mailing Address:**

13103 FAULKNER PLACE  
RIVERVIEW, FL 33569

**New Mailing Address:**

FEI Number: 26-0793336

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

WILLIAMS SCHIFINO MANGIONE & STEADY, P.A.  
ONE TAMPA CITY CENTER, SUITE 3200  
C/O JACQUELINE M. BELL  
TAMPA, FL 33602 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: MILLER, JOAN M  
Address: 13103 FAULKNER PLACE  
City-St-Zip: RIVERVIEW, FL 33569

Title: MGR  
Name: SCOTT, KIMBERLY R  
Address: 13106 FAULKNER PL  
City-St-Zip: RIVERVIEW, FL 33579

Title: MGR  
Name: RAZICK, RICK S  
Address: 806 PAR CT  
City-St-Zip: APOLLO BCH, FL 33572

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: JOAN MILLER

MGRM

03/22/2011

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