

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000011892

**FILED**  
**Apr 08, 2009**  
**Secretary of State**

**Entity Name:** D'LITES OF TEMPLE TERRACE LLC

**Current Principal Place of Business:**

105 S LINCOLN AVENUE  
TAMPA, FL 33609

**New Principal Place of Business:**

5001 E. FOWLER AVE  
E  
TAMPA, FL 33716

**Current Mailing Address:**

105 S LINCOLN AVENUE  
TAMPA, FL 33609

**New Mailing Address:**

105 S LINCOLN AVENUE  
TAMPA, FL 33617

**FEI Number:** 26-1913236

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CHATMAN, ELIZABETH A  
105 S LINCOLN AVENUE  
TAMPA, FL 33609 US

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

THOMPSON, ELIZABETH C  
5001 EAST FOWLER AVE  
E  
TAMPA, FL 33617 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:** ELIZABETH CHATMAN THOMPSON

04/08/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGR ( ) Delete  
**Name:** CHATMAN, ELIZABETH A  
**Address:** 105 S LINCOLN AVENUE  
**City-St-Zip:** TAMPA, FL 33609

**ADDITIONS/CHANGES:**

**Title:** MGR (X) Change ( ) Addition  
**Name:** THOMPSON, ELIZABETH C  
**Address:** 105 S LINCOLN AVENUE  
**City-St-Zip:** TAMPA, FL 33609

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:** ELIZABETH CHATMAN THOMPSON

MGR

04/08/2009

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