

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000023749

FILED
Jan 06, 2009
Secretary of State

Entity Name: WESTERN LIVING DECOR LLC

Current Principal Place of Business:

123 SW PARK STREET
OKEECHOBEE, FL 34972

New Principal Place of Business:

Current Mailing Address:

123 SW PARK STREET
OKEECHOBEE, FL 34972

New Mailing Address:

FEI Number: 33-1206350

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

DRAKE, CHRISTINA
2215 SW 22ND CIRCLE
OKEECHOBEE, FL 34974 US

Name and Address of New Registered Agent:

GAGLIARDI, NANCY
2215 SW 22ND CIRCLE
OKEECHOBEE, FL 34974 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: NANCY GAGLIARDI

01/06/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: DRAKE, CHRISTINA
Address: 123 SW PARK STREET
City-St-Zip: OKEECHOBEE, FL 34972

Title: MGRM () Delete
Name: GAGLIARDI, CHARLES
Address: 123 SW PARK STREET
City-St-Zip: OKEECHOBEE, FL 34972

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: GAGLIARDI, NANCY OWNER
Address: 123 SW PARK STREET
City-St-Zip: OKEECHOBEE, FL 34972

Title: MGRM (X) Change () Addition
Name: GAGLIARDI, JOSEPH OWNER
Address: 123 SW PARK STREET
City-St-Zip: OKEECHOBEE, FL 34972

Title: MGR () Change (X) Addition
Name: GAGLIARDI, CHARLES
Address: 123 SW PARK STREET
City-St-Zip: OKEECHOBEE, FL 34972

Title: MGR () Change (X) Addition
Name: DRAKE, CHRISTINA
Address: 123 SW PARK STREET
City-St-Zip: OKEECHOBEE, FL 34972

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: NANCY GAGLIARDI

MGRM

01/06/2009

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