

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000027502

FILED
Jan 04, 2012
Secretary of State

Entity Name: ROOM SERVICE DESIGN, LLC.

Current Principal Place of Business:

210 PARKTOWNE BLVD
UNIT 2
EDGEWATER, FL 32132 US

New Principal Place of Business:

Current Mailing Address:

210 PARKTOWNE BLVD
UNIT 1
EDGEWATER, FL 32132 US

New Mailing Address:

FEI Number: 75-3118914

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCCRACKEN, PATRICIA
210 PARKTOWNE BLVD
UNIT 1
EDGEWATER, FL 32132 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: MCCRACKEN, PATRICIA
Address: 210 PARKTOWNE BLVD UNIT 1
City-St-Zip: EDGEWATER, FL 32132 US

Title: MGRM
Name: MCCRACKEN, MAURICE
Address: 210 PARKTOWNE BLVD UNIT 1
City-St-Zip: EDGEWATER, FL 32132 US

Title: MGRM
Name: PATTI, MCCRACKEN
Address: 421 CANAL ST
City-St-Zip: NEW SMYRNA BEACH, FL 32168

Title: MGRM
Name: PATTI, MCCRACKEN
Address: 421 CANAL ST
City-St-Zip: NEW SMYRNA BEACH, FL 32168

Title: MGRM
Name: PATTI, MCCRACKEN
Address: 421 CANAL ST
City-St-Zip: NEW SMYRNA BEACH, FL 32168

Title: MGRM
Name: PATTI, MCCRACKEN
Address: 421 CANAL ST
City-St-Zip: NEW SMYRNA BEACH, FL 32168

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: PATRICIA MCCRACKEN

MRS

01/04/2012

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