

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000010344

**FILED**  
**Apr 08, 2011**  
**Secretary of State**

**Entity Name:** WELCOME HOME CONCIERGE SERVICES, LLC

**Current Principal Place of Business:**

740 96TH AVE N  
NAPLES, FL 34108 US

**New Principal Place of Business:**

53 JOHNNYCAKE DRIVE  
NAPLES, FL 34110 US

**Current Mailing Address:**

740 96TH AVE N  
NAPLES, FL 34108 US

**New Mailing Address:**

53 JOHNNYCAKE DRIVE  
NAPLES, FL 34110 US

**FEI Number:** 26-4148100

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GARDNER, KENDALL W  
740 96TH AVE N  
NAPLES, FL 34108 US

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

SICILIANO, DEBI M  
53 JOHNNYCAKE DRIVE  
NAPLES, FL 34110 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: DEBI M. SICILIANO

04/08/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: SICILIANO, JOAN  
Address: 4588 PASSADENA  
City-St-Zip: NAPLES, FL 34109 US

Title: MGR  
Name: SICILIANO, FRANK R  
Address: 53 JOHNNYCAKE DRIVE  
City-St-Zip: NAPLES, FL 34110

Title: MGRM  
Name: SICILIANO, DEBRA M  
Address: 53 JOHNNYCAKE DRIVE  
City-St-Zip: NAPLES, FL 34110

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 SICILIANO

MRS

04/08/2011

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