

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000051203

**FILED**  
**Mar 12, 2010**  
**Secretary of State**

**Entity Name:** DESIGNED FOR LIVING HOMES, LLC

**Current Principal Place of Business:**

290 CYPRESS GARDENS BOULEVARD  
WINTER HAVEN, FL 33880

**New Principal Place of Business:**

290 CYPRESS GARDENS BOULEVARD  
WINTER HAVEN, FL 33880 US

**Current Mailing Address:**

PO BOX 1439  
WINTER HAVEN, FL 338821439

**New Mailing Address:**

PO BOX 1439  
WINTER HAVEN, FL 338821439 US

**FEI Number:** 27-0295684

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SPANJERS, CRAIG M  
1556 SIXTH STREET SE  
WINTER HAVEN, FL 338804509 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: MGR  
Name: NOLEN, J MICHAEL SR  
Address: 290 CYPRESS GARDENS BLVD  
City-St-Zip: WINTER HAVEN, FL 33880 US

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: J M NOLEN SR

MGR

03/12/2010

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