

# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000055274

FILED  
Mar 08, 2011  
Secretary of State

**Entity Name:** TRACE DESIGNS TRACEABLE MURALS LLC

**Current Principal Place of Business:**

444 JOHNS CREEK PARKWAY  
SAINT AUGUSTINE, FL 32092

**New Principal Place of Business:**

**Current Mailing Address:**

444 JOHNS CREEK PARKWAY  
SAINT AUGUSTINE, FL 32092

**New Mailing Address:**

FEI Number: 20-8082898

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SPIEGEL & UTRERA, P.A.  
1840 SW 22ND ST.  
4TH FLOOR  
MIAMI, FL 33145 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: MARASIGAN, MEGAN  
Address: 444 JOHNS CREEK PARKWAY  
City-St-Zip: SAINT AUGUSTINE, FL 32092

Title: MGR  
Name: MARASIGAN, NORMAN  
Address: 444 JOHNS CREEK PARKWAY  
City-St-Zip: SAINT AUGUSTINE, FL 32092

Title: S  
Name: BARRETT, AMY  
Address: 444 JOHNS CREEK PARKWAY  
City-St-Zip: SAINT AUGUSTINE, FL 32092

Title: T  
Name: BROWN, LORNA  
Address: 444 JOHNS CREEK PARKWAY  
City-St-Zip: SAINT AUGUSTINE, FL 32092

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: MEGAN MARASIGAN

PRES

03/08/2011

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