

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000046575

**FILED**  
**Jul 21, 2011**  
**Secretary of State**

**Entity Name:** LANGSTON SPROWLS DESIGN GROUP LLC

**Current Principal Place of Business:**

303 DE SOTO STREET  
TALLAHASSEE, FL 32303

**New Principal Place of Business:**

**Current Mailing Address:**

303 DE SOTO STREET  
TALLAHASSEE, FL 32303

**New Mailing Address:**

**FEI Number:** 27-2494201

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LANGSTON, D. LANCE  
201 S. MONROE STREET  
TALLAHASSEE, FL 32301 US

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

LANGSTON, D. LANCE  
111 NORTH CALHOUN STREET  
TALLAHASSEE, FL 32301 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: \_\_\_\_\_

Electronic Signature of Registered Agent

07/21/2011

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: LANGSTON, CARY V  
Address: 303 DE SOTO STREET  
City-St-Zip: TALLAHASSEE, FL 32303

Title: MGRM  
Name: SPROWLS, ELLEN C  
Address: 981 ILEX WAY  
City-St-Zip: TALLAHASSEE, FL 32312

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: CARY V. LANGSTON

MGRM

07/21/2011

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