

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000064133

**FILED**  
**Aug 30, 2011**  
**Secretary of State**

**Entity Name:** LE MACARON DEVELOPMENT LLC

**Current Principal Place of Business:**

382 ST ARMAND CIRCLE  
SARASOTA, FL 34236

**New Principal Place of Business:**

**Current Mailing Address:**

382 ST ARMAND CIRCLE  
SARASOTA, FL 34236

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For (X)**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GUILLEM, ROSALIE  
3919 SOLYMAR DRIVE  
SARASOTA, FL 34242 US

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

GUILLEM, ROSALIE  
1201 LOST CREEK COURT  
OSPREY, FL 34229 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: GUILLEM ROSALIE

08/30/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: GUILLEM, ROSALIE  
Address: 382 ST ARMAND CIRCLE  
City-St-Zip: SARASOTA, FL 34236

Title: MGRM  
Name: GUILLEM-SABA, AUDREY  
Address: 382 ST ARMAND CIRCLE  
City-St-Zip: SARASOTA, FL 34236

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: GUILLEM ROSALIE

MGRM

08/30/2011

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