2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 05, 2005
Secretary of State

DOCUMENT# L01000004898

Entity Name: EDUCATIONAL DESIGN ASSOCIATES, LLC

Current Principal Place of Business:

741 SOUTH ORANGE AVENUE
SARASOTA, FL 34236

New Principal Place of Business:

Current Mailing Address:

741 SOUTH ORANGE AVENUE
SARASOTA, FL 34236

New Mailing Address:

FEI Number: 65-1109281 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

CARLSON, MICHAEL
741 SOUTH ORANGE AVENUE
SARASOTA, FL 34236 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/MEMBERS:

Title:	MGRM	( ) Delete
Name:	ALLEN, RICHARD G JR.	
Address:	3847 SOUTH SCHOOL AVENUE	
City-St-Zip:	SARASOTA, FL 34239	
Title:	MGRM	( ) Delete
Name:	ALLEN, RICHARD G AIA	
Address:	3847 SOUTH SCHOOL AVENUE	
City-St-Zip:	SARASOTA, FL 34239 US	
Title:	MGRM	( ) Delete
Name:	CARLSON, MICHAEL R AIA	
Address:	741 SOUTH ORANGE AVENUE	
City-St-Zip:	SARASOTA, FL 34236 US	

ADDITIONS/CHANGES:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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: MICHAEL R. CARLSON, AIA MGRM 04/05/2005

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