

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000006956

FILED
Apr 28, 2008
Secretary of State

Entity Name: THE HOUSE DESIGNERS, LLC

Current Principal Place of Business:

181 MAIN ST STE C
MONROE, CT 06468

New Principal Place of Business:

181 MAIN ST STE C
SUITE C
MONROE, CT 06468

Current Mailing Address:

181 MAIN ST STE C
MONROE, CT 06468

New Mailing Address:

FEI Number: 59-3716529

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CROSBY, TAMMY
580 CAPE COD LANE
LANDING TOWNE SHOPPES, SUITE 9
ALTAMONTE SPRINGS, FL 32714 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 () Delete
Name: JAMES, BENNY
Address: 2208 JUSTICE STREET
City-St-Zip: MONROE, LA 71201

Title: MGR () Delete
Name: PERFECT HOME PLANS,
Address: 66 HARNED ROAD
City-St-Zip: COMMACK, NY 11725

Title: MGR () Delete
Name: LIVING CONCEPTS,
Address: 7400 CARMEL EXEC PARK
City-St-Zip: CHARLOTTE, NC 28226

Title: MGR () Delete
Name: ALAN MASCORD DESIGN, ASSOCIATES
Address: 1305 NW 18TH AVENUE
City-St-Zip: PORTLAND, OR 97209

Title: MGR () Delete
Name: ZIRKEL, JIM
Address: 580 CAPE COD LANE, SUITE 9
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: MGR () Delete
Name: ARCHIVAL DESIGNS,
Address: 1235 BUFORD HWY
City-St-Zip: SUWANEE, GA 30024 US

ADDITIONS/CHANGES:

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

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

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

Title: () Change () Addition
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Title: () Change () Addition
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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 exemption stated in Chapter 119, 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: TAMMY CROSBY

COO

04/28/2008

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