2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jun 08, 2005 08:00 AM
Secretary of State

DOCUMENT # L01000015860

1. Entity Name
THE WYNN DESIGN GROUP, LLC

Principal Place of Business	Mailing Address
2734 DAVIS STREET JACKSONVILLE, FL 32209	2734 DAVIS ST. N. JACKSONVILLE, FL 32209

DO NOT WRITE IN THIS SPACE

06022005 No Chg-LLC   CR2E083 (10/03)

4. FEI Number 59-3750557	Applied For
	Not Applicable

5. Certificate of Status Desired ☑ $5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

WYNN, DANIEL R
1785 SOUTH EDGEWOOD AVENUE
JACKSONVILLE, FL 32205

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

Signature, typed or printed name of registered agent and title if applicable   (NOTE: Registered Agent signature required when reinstating)   DATE

Filing Fee is $50.00
Due by September 7, 2005

9.	MANAGING MEMBERS/MANAGERS
TITLE	D
NAME	WYNN, DANIEL R
STREET ADDRESS	2734 DAVIS ST N.
CITY-ST-ZIP	JACKSONVILLE, FL 32209
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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11. I hereby certify that the information supplied with this filing does not qualify 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 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: _Daniel R Wynn_   6/2/05   904-366-3591

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE   Date   Daytime Phone #