

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000002707

FILED
Jul 04, 2005
Secretary of State

Entity Name: MEETINGS BY DESIGN, LLC

Current Principal Place of Business:

205 EAST LAKESHORE DR.
TALLAHASSEE, FL 32312

New Principal Place of Business:

Current Mailing Address:

205 EAST LAKESHORE DR.
TALLAHASSEE, FL 32312

New Mailing Address:

FEI Number: 41-2026043 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

OBRIEN, SCOTT
205 E LAKESHORE DR
TALLAHASSEE, FL 32312 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

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: MCCARTHY, ROBERT F
Address: 11 COPLEY RD.
City-St-Zip: SOUTH GASTONBURY, CT 06073

Title: MGRM () Delete
Name: OBRIEN, SCOTT
Address: 205 EAST LAKESHORE DR.
City-St-Zip: TALLAHASSEE, FL 32312

ADDITIONS/CHANGES:

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: SCOTT OBRIEN

MGRM

07/04/2005

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