2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

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DOCUMENT # L02000008185

1. Entity Name

DESIGN ARTS OF PALM BEACH, LLC



FILED Feb 14, 2007 08:00 A Secretary of State

Principal Place of Business

2005 VISTA PKWY 100

WEST PALM BEACH, FL 33411

Mailing Address

2005 VISTA PKWY 100 WEST PALM BEACH, FL 33411



02122007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 01-0667688

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

THOMAS, DENNIS J 2005 VISTA PKWY 100 WEST PALM BEACH, FL 33411

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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

CITY-ST-ZIP

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstaling)

DATE

Filing Fee is \$50.00 Due by May 1, 2007

9.	MANAGING MEMBERS/MANAGERS
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM THOMAS, DENNIS J 2005 VISTA PKWY 100 WEST PALM BEACH, FL 33411
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM JOHN, DAVID L 2005 VISTA PKWY 100 WEST PALM BEACH, FL 33411
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET AODRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS	

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 mistee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE

DENNIS J. THOMAS

2/12/07 541689.1138