

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000011862

FILED
Sep 02, 2006
Secretary of State

Entity Name: CHOMODESIGN LLC

Current Principal Place of Business:

3111 W. MLK JR BLVD
SUITE 100
TAMPA, FL 33607

New Principal Place of Business:

Current Mailing Address:

2546 6TH AVE SO
SAINT PETERSBURG, FL 33712

New Mailing Address:

FEI Number: 01-0680921 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:

MOSLEY, CHON
2546 6TH AVE SO
SAINT PETERSBURG, FL 33712 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: MGRM () Delete
Name: MOSLEY, CHON
Address: 2546 6TH AVE SO
City-St-Zip: SAINT PETERSBURG, FL 33712

Title: MGRM () Delete
Name: KEYS, BARBARA M
Address: 2546 6TH AVE. SO.
City-St-Zip: ST. PETE, FL 33712

Title: MGRM () Delete
Name: REID, LEONNE
Address: 6804 TIMBERLAND DR. W.
City-St-Zip: TAMPA, FL 33615

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 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: CHON MOSLEY

MGRM

09/02/2006

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