

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000026475

FILED
Mar 09, 2004
Secretary of State

Entity Name: EMBROIDERY BY DESIGN, LLC

Current Principal Place of Business:

119 TAMIAMI TRAIL
PORT CHARLOTTE, FL 33953

New Principal Place of Business:

1242 MARKET CIRCLE
UNIT 3C
PORT CHARLOTTE, FL 33953

Current Mailing Address:

119 TAMIAMI TRAIL
PORT CHARLOTTE, FL 33953

New Mailing Address:

1003 N GONDOLA DR
VENICE, FL 34293

FEI Number: 02-0651580

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MAURO, NICHOLAS F
119 TAMIAMI TRAIL
PORT CHARLOTTE, FL 33953 US

Name and Address of New Registered Agent:

MAURO, NICHOLAS F
1003 N GONDOLA DR
VENICE, FL 34293 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:

03/09/2004

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: MAURO, NICHOLAS F
Address: 1003 N GONDOLA DRIVE
City-St-Zip: VENICE, FL 34293

Title: MGRM () Delete
Name: MAURO, GREGORY
Address: 6460 S.W. COLLINS STREET
City-St-Zip: FORT ODGEN, FL 34263

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: NICHOLAS MAURO

OWNE

03/09/2004

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