


**2004 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Mar 15, 2004 08:00 AM
Secretary of State

DOCUMENT # L02000033468 1. Entity Name ROBERT WILLIAMS DESIGN, L.L.C.	
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Principal Place of Business 120 CUMBERLAND PARK DRIVE, STE. 406 ST. AUGUSTINE, FL 32095	Mailing Address 120 CUMBERLAND PARK DRIVE, STE. 406 ST. AUGUSTINE, FL 32095
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DO NOT WRITE IN THIS SPACE



01242004 No Chg-LLC

CR2E083 (10/03)

4. FEI Number 13-4233348	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	

6. Name and Address of Current Registered Agent

**PRATT, DENNIS L
10450 SAN JOSE BLVD.
JACKSONVILLE, FL**

**DO NOT WRITE
IN THIS SPACE**

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

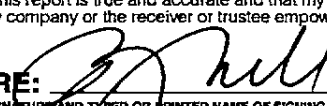
**Filing Fee is \$50.00
Due by May 1, 2004**

U000000089392
03/15/04-80090-004 50.00

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM ASPINWALL, ROBERT J 6010 A1A SOUTH ST. AUGUSTINE, FL 32080
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IN THIS SPACE**

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:  **ROBERT J. ASPINWALL** **03/11/04** **904-810-1000**

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