

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000023173

Entity Name: WOLFF DESIGN STUDIO, LLC

FILED
Jan 04, 2005
Secretary of State

Current Principal Place of Business:

117 B BROADWAY AVE - SUITE H
KISSIMMEE, FL 34741

New Principal Place of Business:

Current Mailing Address:

117 B BROADWAY AVE - SUITE H
KISSIMMEE, FL 34741

New Mailing Address:

FEI Number: 35-2215723

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WOLFF, JEFFREY D
1503 REGAL COVE BLVD
KISSIMMEE, FL 34741 US

Name and Address of New Registered Agent:

WOLFF, JEFFREY D
1503 REGAL COVE BLVD
KISSIMMEE, FL 34744 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: JEFFREY D. WOLFF

01/04/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGR () Delete
Name: WOLFF, JEFFREY D
Address: 1503 REGAL COVE BLVD
City-St-Zip: KISSIMMEE, FL 34741

Title: MGR () Delete
Name: WOLFF, KAREN H
Address: 1503 REGAL COVE BLVD
City-St-Zip: KISSIMMEE, FL 34741

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: WOLFF, JEFFREY D
Address: 1503 REGAL COVE BLVD
City-St-Zip: KISSIMMEE, FL 34744

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: JEFFREY D WOLFF

PRES

01/04/2005

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