

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000049000

**FILED**  
**Jan 04, 2005**  
**Secretary of State**

**Entity Name:** STUDIO A INTERIOR DESIGN, LLC

**Current Principal Place of Business:**

456 WEST 10TH AVENUE  
MOUNT DORA, FL 32757

**New Principal Place of Business:**

23001 OAK PRAIRIE CIRCLE  
SORRENTO, FL 32776

**Current Mailing Address:**

456 WEST 10TH AVENUE  
MOUNT DORA, FL 32757

**New Mailing Address:**

23001 OAK PRAIRIE CIRCLE  
SORRENTO, FL 32776

FEI Number: 20-0492513

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

DUNCAN, BRUCE G  
308 EAST FIFTH AVENUE  
MOUNT DORA, FL 32757 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/MEMBERS:**

Title: MGR ( ) Delete  
Name: DUNCAN, STEPHANIE K  
Address: 456 WEST 10TH AVENUE  
City-St-Zip: MOUNT DORA, FL 32757

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: DUNCAN, STEPHANIE K  
Address: 23001 OAK PRAIRIE CIRCLE  
City-St-Zip: SORRENTO, FL 32776

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: STEPHANIE DUNCAN

MRS

01/04/2005

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