

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000039950

FILED
Jan 07, 2005
Secretary of State

Entity Name: WAHL/CHRISTIANSEN DESIGN STUDIO, LLC

Current Principal Place of Business:

P.O. BOX 49
MICANOPY, FL 326670049

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 49
MICANOPY, FL 326670049

New Mailing Address:

FEI Number: 20-1220426 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

WAHL, KARL
21810 NW 75TH AVE. ROAD
MICANOPY, FL 32667 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: WAHL, KARL
Address: P.O. BOX 49
City-St-Zip: MICANOPY, FL 326670049

Title: MGRM () Delete
Name: CHRISTIANSEN, DIANA
Address: P.O. BOX 49
City-St-Zip: MICANOPY, FL 326670049

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: KARL WAHL

MGR

01/07/2005

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