

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000046767

FILED
Mar 02, 2006
Secretary of State

Entity Name: RECREATIONAL DESIGN, LLC

Current Principal Place of Business:

411 HAWK ST
ROCKLEDGE, FL 32955

New Principal Place of Business:

375 GUS HIPP BLVD
ROCKLEDGE, FL 32955

Current Mailing Address:

411 HAWK ST
ROCKLEDGE, FL 32955

New Mailing Address:

375 GUS HIPP BLVD
ROCKLEDGE, FL 32955

FEI Number: 20-1275285

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FOSS, ORLANDO W
411 HAWK ST
ROCKLEDGE, FL 32955 US

Name and Address of New Registered Agent:

FOSS, ORLANDO W
375 GUS HIPP BLVD
ROCKLEDGE, FL 32955 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:

03/02/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: FOSS, ORLANDO W
Address: 343 N TROPICAL TRAIL 208A
City-St-Zip: MERRITT ISLAND, FL 32953

Title: MGR () Delete
Name: LONDO, KEVIN C
Address: 1820 LIVE OAK DRIVE SOUTH
City-St-Zip: ROCKLEDGE, FL 32955

Title: MGR () Delete
Name: LASCHOVER, GERALD R
Address: 6840 HARP AVE
City-St-Zip: COCOA, FL 32927

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 Chapter 119, 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: ORLANDO W. FOSS

MGR

03/02/2006

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