

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000069891

**FILED**  
**Mar 16, 2006**  
**Secretary of State**

**Entity Name:** SPEND LESS DRIVEWAY DESIGNS, LLC

**Current Principal Place of Business:**

9659 SE 165TH LANE  
SUMMERFIELD, FL 34491 US

**New Principal Place of Business:**

**Current Mailing Address:**

9659 SE 165TH LANE  
SUMMERFIELD, FL 34491 US

**New Mailing Address:**

**FEI Number:** 74-3131551      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

FREITAG, HENRY J  
9659 SE 165TH LANE  
SUMMERFIELD, FL 34491 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/MANAGERS:**

Title: MGR ( ) Delete  
Name: FREITAG, HENRY J  
Address: 9659 SE 165TH LANE  
City-St-Zip: SUMMERFIELD, FL 34491 US

Title: MGRM ( ) Delete  
Name: DAVIDSON, FERRIS L  
Address: 9656 SE 167TH PL  
City-St-Zip: SUMMERFIELD, FL 34491 US

**ADDITIONS/CHANGES:**

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

Title: MGRM (X) Change ( ) Addition  
Name: FORMISANO, MICHAEL  
Address: 9574 SE 165TH LN  
City-St-Zip: SUMMERFIELD, FL 34491 US

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: HENRY J FREITAG

MGR

03/16/2006

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