

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000020458

Entity Name: C D GREETING LLC

FILED
May 01, 2008
Secretary of State

Current Principal Place of Business:

1995 EAST OAKLAND PARK BLVD., STE. 115
FORT LAUDERDALE, FL 33306

New Principal Place of Business:

1995 EAST OAKLAND PARK BLVD., STE. 315
FORT LAUDERDALE, FL 33306

Current Mailing Address:

1995 EAST OAKLAND PARK BLVD., STE. 115
FORT LAUDERDALE, FL 33306

New Mailing Address:

1995 EAST OAKLAND PARK BLVD., STE. 315
FORT LAUDERDALE, FL 33306

FEI Number: 34-2041209 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

FOUST, LISA A
510 GARDENS DRIVE #101
POMPANO BEACH, FL 33069 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: MGRM () Delete
Name: FOUST, LISA A
Address: 510 GARDENS DRIVE #101
City-St-Zip: POMPAÑO BEACH, FL 33069

Title: MGR () Delete
Name: WILBURT, COLLEEN
Address: 4501 NE 21ST AVENUE
City-St-Zip: FORT LAUDERDALE, FL 33308

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 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: LISA A FOUST

MGRM

05/01/2008

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