

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000043574

**FILED**  
**Jan 08, 2010**  
**Secretary of State**

**Entity Name:** DESIGN & EDUCATIONAL SERVICES, LLC

**Current Principal Place of Business:**

988 EGRETS RUN  
UNIT 101  
NAPLES, FL 34108 US

**New Principal Place of Business:**

**Current Mailing Address:**

988 EGRETS RUN  
UNIT 101  
NAPLES, FL 34108 US

**New Mailing Address:**

**FEI Number:** 20-2780716

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

COHEN, HENRY C  
27200 RIVERVIEW CENTER BLVD.  
SUITE 309  
BONITA SPRINGS, FL 34134 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  
Name: HARWAY, MAXWELL  
Address: 988 EGRETS RUN, UNIT 101  
City-St-Zip: NAPLES, FL 34108 US

Title: MGMR  
Name: HARWAY, CECEANN W  
Address: 988 EGRETS RUN, UNIT 101  
City-St-Zip: NAPLES, FL 34108

I hereby 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: MAXWELL HARWAY

MGRM

01/08/2010

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