

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jan 07, 2008 08:00 AM
Secretary of State

DOCUMENT # L05000059966 1. Entity Name PERFORMANCE DESIGN CONSULTANTS, LLC	
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Principal Place of Business 8201 S.W. 56TH TERRACE OCALA, FL 34476 US	Mailing Address 8201 S.W. 56TH TERRACE OCALA, FL 34476 US
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01042008 No Chg-LLC

CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number NOT APPLICABLE	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent CARRERAS, RAUL JR. 101 S.W. 3RD STREET OCALA, FL 34474

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE _____


FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

1100000775582
01/08/08-80031-010 138.75

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM ROBERTS, FRED C III 8201 S.W. 56TH TERRACE OCALA, FL 34476
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IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:  **FRED C. ROBERTS III** **JAN 5, 2008** **352-873-7729**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #