

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000015537

FILED
Feb 19, 2009
Secretary of State

Entity Name: DESIGN SCHEMES OF FLORIDA, LLC

Current Principal Place of Business:

7916 DREW CIR #7
FT MYERS, FL 33967

New Principal Place of Business:

Current Mailing Address:

7916 DREW CIR #7
FT MYERS, FL 33967

New Mailing Address:

FEI Number: 20-4289824

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VOGEL, JAMES D
3936 TAMIAMI TRAIL NORTH, SUITE B
NAPLES, FL 34103 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: LAWRENCE, DAVID A
Address: 6620 ESTERO BLVD.
City-St-Zip: FORT MYERS BEACH, FL 33931

Title: MGR () Delete
Name: TODD, RALPH L
Address: 23343 OLDE MEADOWBROOK CIRCLE
City-St-Zip: BONITA SPRINGS, FL 34134

Title: MGR () Delete
Name: SWANSON, BROOKS R
Address: 18871 CYPRESS VIEW DR
City-St-Zip: FORT MYERS, FL 33967

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 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: RALPH TODD

MGR

02/19/2009

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