

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000062265

FILED  
Jan 11, 2007  
Secretary of State

Entity Name: BEAULAND HOME DESIGNS, LLC

## Current Principal Place of Business:

2328 DESTINY WAY  
A100  
ODESSA, FL 33556

## New Principal Place of Business:

## Current Mailing Address:

P.O. BOX 1261  
DUNEDIN, FL 34697

## New Mailing Address:

FEI Number: 20-5092306

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

KONRAD, WILLIAM S  
3617 TOWN AVENUE  
NEW PORT RICHEY, FL 34655 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: KONRAD, WILLIAM S  
Address: 3617 TOWN AVE.  
City-St-Zip: NEW PORT RICHEY, FL 34655

Title: MGR ( ) Delete  
Name: ANDRE, BEAU J  
Address: 2708 ALT. 19 NORTH. SUITE 507-6  
City-St-Zip: PALM HARBOR, FL 34683

Title: MGR ( ) Delete  
Name: BEAU, PHILIPPE  
Address: 2708 ALT. 19 NORTH. SUITE 507-6  
City-St-Zip: PALM HARBOR, FL 34683

Title: MGR ( ) Delete  
Name: CURTIS, ROGER A  
Address: 7450 NW 53RD LANE  
City-St-Zip: CHIEFLAND, FL 32626

## 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:

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

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: PHILIPPE BEAU

MGR

01/11/2007

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