

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000081045

FILED
Apr 02, 2007
Secretary of State

Entity Name: DESIGNER LIFESTYLES "LLC"

Current Principal Place of Business:

3213 TRAFALGAR CT
ST AUGUSTINE, FL 32092

New Principal Place of Business:

3213 TRAFALGAR CT
SAINT AUGUSTINE, FL 32092

Current Mailing Address:

PO BOX 24846
JACKSONVILLE, FL 32241

New Mailing Address:

2220 COUNTY ROAD 210 W
STE# 108-428
SAINT JOHNS, FL 32259

FEI Number: 20-5406635

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MAYER, CHRISTOPHER J
3213 TRAFALGAR CT
ST AUGUSTINE, FL 32092 US

Name and Address of New Registered Agent:

MAYER, CHRISTOPHER J
3213 TRAFALGAR CT
SAINT AUGUSTINE, FL 32092 US

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: CHRISTOPHER J MAYER

04/02/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: P/D () Change (X) Addition
Name: MAYER, CHRISTOPHER J
Address: 3213 TRAFALGAR CT
City-St-Zip: SAINT AUGUSTINE, FL 32092

Title: VP/D () Change (X) Addition
Name: MAYER, CELIBETH M
Address: 3213 TRAFALGAR CT
City-St-Zip: SAINT AUGUSTINE, FL 32092

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: CHRISTOPHER J MAYER

P/D

04/02/2007

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