

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000089670

Entity Name: DEROOY DESIGNS, LLC

FILED
Jan 15, 2008
Secretary of State

Current Principal Place of Business:

7501 SUN KEY BLVD.
SUITE. 2511
WINTER PARK, FL 32792

New Principal Place of Business:

1731 GRAND RUE DR
CASSELBERRY, FL 32707

Current Mailing Address:

7501 SUN KEY BLVD.
SUITE 2511
WINTER PARK, FL 32792

New Mailing Address:

1731 GRAND RUE DR
CASSELBERRY, FL 32707

FEI Number: 20-5531069

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DEROY, JONATHAN
7501 SUN KEY BLVD.
SUITE. 2511
WINTER PARK, FL 32792 US

Name and Address of New Registered Agent:

DEROY, JONATHAN
1731 GRAND RUE DR
CASSELBERRY, FL 32707 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:

01/15/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: DEROY, JONATHAN
Address: 7501 SUN KEY BLVD., SUITE 2511
City-St-Zip: WINTER PARK, FL 32792

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

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: DEROY, JONATHAN
Address: 1731 GRAND RUE DR
City-St-Zip: CASSELBERRY, FL 32707

Title: MGRM () Change (X) Addition
Name: JOEY, VISSER
Address: 1701 ALPHA VALLY HOME ROAD
City-St-Zip: MORRISTOWN, TN 32813

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: JONATHAN DEROY

MGRM

01/15/2008

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