

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000106763

**FILED**  
**Apr 30, 2007**  
**Secretary of State**

**Entity Name:** INTUITIVE DESIGNS & CONSULTING LLC

**Current Principal Place of Business:**

10374 ROGER HAMLIN ROAD  
TALLAHASSEE, FL 32311

**New Principal Place of Business:**

1508 LOCHINVAR LN  
TALLAHASSEE, FL 32317

**Current Mailing Address:**

10374 ROGER HAMLIN ROAD  
TALLAHASSEE, FL 32311

**New Mailing Address:**

1508 LOCHINVAR LN  
TALLAHASSEE, FL 32317

**FEI Number:** 20-5818746

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

JAMES D A HOLLEY & CO, P.A.  
2878 MAHAN DR  
TALLAHASSEE, FL 32308 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: REISINGER, ROBERT M  
Address: 10374 ROGER HAMLIN ROAD  
City-St-Zip: TALLAHASSEE, FL 32311

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: REISINGER, ROBERT M  
Address: 1508 LOCHINVAR LN  
City-St-Zip: TALLAHASSEE, FL 32317

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: ROBERT REISINGER

MGRM

04/30/2007

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