

# 2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000108219

**FILED**  
**Apr 21, 2010**  
**Secretary of State**

**Entity Name:** DESIGNER T'S OF FLORIDA, LLC

**Current Principal Place of Business:**

10613 DEL PRADO DRIVE WEST  
LARGO, FL 33774 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O BOX 4241  
SEMINOLE, FL 33775 US

**New Mailing Address:**

**FEI Number:** 20-5852060

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MCNALLY, DAVID A SR  
10613 DEL PRADO DR WEST  
LARGO, FL 33774 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  
Name: MCNALLY, DAVID A SR  
Address: P.O. BOX 4241  
City-St-Zip: SEMINOLE, FL 33775 US

Title: MGR  
Name: MCNALLY, JANE E  
Address: P.O. BOX 4241  
City-St-Zip: SEMINOLE, FL 33775 US

I hereby 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: DAVID A MCNALLY SR

MGR

04/21/2010

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