

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000001629

FILED  
Jan 21, 2008  
Secretary of State

Entity Name: IE:DESIGNS, LLC

## Current Principal Place of Business:

11034 HARBOR CAY CT  
JACKSONVILLE, FL 32225

## New Principal Place of Business:

12086 FORT CAROLINE ROAD  
501  
JACKSONVILLE, FL 32225

## Current Mailing Address:

11034 HARBOR CAY CT  
JACKSONVILLE, FL 32225

## New Mailing Address:

12086 FORT CAROLINE ROAD  
501  
JACKSONVILLE, FL 32225

FEI Number: 20-8430922

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SCHLEEF, ROBERT D  
11034 HARBOR CAY CT.  
JACKSONVILLE, FL 32225 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: MAILLE, BRIGETTE  
Address: VILLA SOLEIL 568 CHEMIN DU GABRE  
City-St-Zip: AURIBEAU SUR SIAGNE, FR 06810 FR

Title: MGRM ( ) Delete  
Name: GIBSON, JOHN  
Address: 4431 HARBOUR ISLAND DR  
City-St-Zip: JACKSONVILLE, FL 32225

Title: MGRM ( ) Delete  
Name: SCHLEEF, ROBERT  
Address: 11034 HARBOR CAY CT.  
City-St-Zip: JACKSONVILLE, FL 32225

## 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:

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 SCHLEEF

MGRM

01/21/2008

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