

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000114897

FILED
Apr 30, 2008
Secretary of State

Entity Name: LILY'S DESIGN TALLEYRAND, LLC

Current Principal Place of Business:

101 S. FRANKLIN STREET, SUITE 101
TAMPA, FL 33602

New Principal Place of Business:

826 TALLEYRAND AVE.
JACKSONVILLE, FL 32206

Current Mailing Address:

101 S. FRANKLIN STREET, SUITE 101
TAMPA, FL 33602

New Mailing Address:

P.O. BOX 12485
ATLANTA, GA 30355

FEI Number: 26-1771195

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

GARDNER, J. STEPHEN
101 S. FRANKLIN STREET, SUITE 101
TAMPA, FL 33602 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: () Delete
Name:
Address:
City-St-Zip:

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

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

ADDITIONS/CHANGES:

Title: MS. () Change (X) Addition
Name: WELTY, LILIANE M
Address: 826 TALLEYRAND AVE.
City-St-Zip: JACKSONVILLE, FL 32206

Title: MR. () Change (X) Addition
Name: LEONAITIS, LEONARD L
Address: 835 PEACHTREE BATTLE AVE.
City-St-Zip: ATLANTA, GA 30327

Title: MRS. () Change (X) Addition
Name: LEONAITIS, GLORIA M
Address: 835 PEACHTREE BATTLE AVE.
City-St-Zip: ATLANTA, GA 30327

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: LILIANE M. WELTY

MS.

04/30/2008

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