

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000120713

FILED  
Sep 25, 2008  
Secretary of State

Entity Name: EXTREME DESIGN SERVICES LLC

## Current Principal Place of Business:

5420 CENTRAL AVE.  
1A FIRST FLOOR  
ST PETERSBURG, FL 33707

## Current Mailing Address:

PO BOX 49271  
ST PETERSBURG, FL 33743

## New Principal Place of Business:

7019 FIRST AVENUE S  
2  
ST PETERSBURG, FL 33707

## New Mailing Address:

FEI Number: 74-3242875      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

THOMPSON, JON  
5420 CENTRAL AVE.  
1A FIRST FLOOR  
ST PETERSBURG, FL 33707 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: EXTREME ENTERPRISES, INC  
Address: PO BOX 49271  
City-St-Zip: ST PETERSBURG, FL 33707

Title: MGR ( ) Delete  
Name: GARBOWICZ, ROBERT J JR  
Address: PO BOX 49271  
City-St-Zip: ST PETERSBURG, FL 33707

Title: MGR ( ) Delete  
Name: HANIS, GREG  
Address: PO BOX 49271  
City-St-Zip: ST PETERSBURG, FL 33707

Title: MGR ( ) Delete  
Name: THOMPSON, JON A  
Address: PO BOX 49271  
City-St-Zip: ST PETERSBURG, FL 33707

Title: MGR ( ) Delete  
Name: VAZQUEZ, RICARDO J  
Address: PO BOX 49271  
City-St-Zip: ST PETERSBURG, FL 33707

## 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:

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 J. GARBOWICZ, JR.

MGMM

09/25/2008

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