2009 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L08000020608

Entity Name: NEW EGG DESIGN LLC

FILED Aug 05, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

2893 BIG SKY BLVD. SUITE 7 KISSIMMEE, FL 34744

New Mailing Address: Current Mailing Address:

PO BOX 700068 SAINT CLOUD, FL 34770

FEI Number: 26-2447847 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

WALTER C THOMAS JR., P.A. 6700 S. FLORIDA AVE STE. 29 LAKELAND, FL 33813 US

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: ADDITIONS/CHANGES:

MGRM Title: MGRM () Delete (X) Change () Addition JACQUES, S. Name: Name: CLARK, D.

Address: PO BOX 700068 Address: PO BOX 700068 City-St-Zip: SAINT CLOUD, FL 34770 City-St-Zip: SAINT CLOUD, FL 34770

Title: MGRM Title: (X) Delete () Change () Addition

Name: CLARK, D. Name: Address: PO BOX 700068 Address: City-St-Zip: SAINT CLOUD, FL 34770 City-St-Zip:

Title: MGRM (X) Delete Title: () Change () Addition

ROSS, M. Name: Name: PO BOX 700068 Address: Address: City-St-Zip: SAINT CLOUD, FL 34770 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: D CLARK **MGRM** 08/05/2009