

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000064704

FILED
Mar 18, 2009
Secretary of State

Entity Name: BERRYMAN DESIGNS, LLC

Current Principal Place of Business:

1400 BURGOS DRIVE
SARASOTA, FL 34238

New Principal Place of Business:

1804 SANDALWOOD DRIVE
SARASOTA, FL 34231

Current Mailing Address:

1400 BURGOS DRIVE
SARASOTA, FL 34238

New Mailing Address:

1804 SANDALWOOD DRIVE
SARASOTA, FL 34231

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BERRYMAN, ROBERT C
1400 BURGOS DRIVE
SARASOTA, FL 34238 US

Name and Address of New Registered Agent:

BERRYMAN, ROBERT C
1804 SANDALWOOD DRIVE
SARASOTA, FL 34231 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: TAMARA M BERRYMAN

03/18/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MRG () Delete
Name: BERRYMAN, ROBERT C
Address: 1400 BURGOS DRIVE
City-St-Zip: SARASOTA, FL 34238

Title: MGRM () Delete
Name: BERRYMAN, TAMARA M
Address: 1400 BURGOS DRIVE
City-St-Zip: SARASOTA, FL 34238

ADDITIONS/CHANGES:

Title: MRG (X) Change () Addition
Name: BERRYMAN, ROBERT C
Address: 1804 SANDALWOOD DRIVE
City-St-Zip: SARASOTA, FL 34231

Title: MGRM (X) Change () Addition
Name: BERRYMAN, TAMARA M
Address: 1804 SANDALWOOD DRIVE
City-St-Zip: SARASOTA, FL 34231

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 C BERRYMAN

MGR

03/18/2009

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