

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000086304

Entity Name: B SHARP DESIGN, LLC

FILED
May 11, 2009
Secretary of State

Current Principal Place of Business:

7616 SOUTHLAND BLVD
SUITE 105
ORLANDO, FL 32809

New Principal Place of Business:

2379 PINE TREE TERR
KISSIMMEE, FL 34744

Current Mailing Address:

P O BOX 452012
KISSIMMEE, FL 347452012

New Mailing Address:

FEI Number: 26-3339663 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

SMALLEY & COMPANY, P.L.
1517 E HILLCREST STREET
ORLANDO, FL 32803 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: BITTING, DIANA L
Address: 2379 PINE TREE TERRACE
City-St-Zip: KISSIMMEE, FL 34744

Title: MGRM () Delete
Name: EDGAR, KELLY S
Address: 5813 GUENEVERE COURT
City-St-Zip: ST CLOUD, FL 34772

ADDITIONS/CHANGES:

Title: P (X) Change () Addition
Name: BITTING, DIANA L
Address: 2379 PINE TREE TERRACE
City-St-Zip: KISSIMMEE, FL 34744

Title: CEO (X) Change () Addition
Name: BITTING, TERRY L
Address: 2379 PINE TREE TERRACE
City-St-Zip: KISSIMMEE, FL 34744

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: DIANA L. BITTING

P

05/11/2009

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