

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M01000002105

Entity Name: CENTER DESIGNS, LLC

FILED  
Jan 06, 2005  
Secretary of State

**Current Principal Place of Business:**

725 PRIMERA BOULEVARD, SUITE 200  
LAKE MARY, FL 327952798

**New Principal Place of Business:**

**Current Mailing Address:**

POST OFFICE BOX 952798  
LAKE MARY, FL 327952798

**New Mailing Address:**

FEI Number: 58-2488833

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MORRISON, WILLIAM H ESQUIRE  
BALDWIN & MORRISON, P.A.  
7100 SOUTH U.S. HIGHWAY 17-92  
FERN PARK, FL 32730 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/MEMBERS:**

Title: MGRM ( ) Delete  
Name: ABRUZZINO, WILLIAM A  
Address: POST OFFICE BOX 952798  
City-St-Zip: LAKE MARY, FL 327952798

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: WILLIAM A. ABRUZZINO

MGRM

01/06/2005

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