


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 03, 2008 8:00 am
Secretary of State

03-03-2008 90406 022 ***138.75

DOCUMENT # M07000002931	
1. Entity Name FRY DESIGN GROUP, LLC	

Principal Place of Business 3888 NORTHSIDE DR. SUITE B MACON, GA 31210	Mailing Address 3888 NORTHSIDE DR. SUITE B MACON, GA 31210
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DO NOT WRITE IN THIS SPACE



01172008 No Chg-LLC CR2E083 (12/07)

4. FEI Number 80-0129313	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

AYDELOTT, STEVE
 824 TARPON DRIVE
 FT. WALTON BEACH, FL 32548-6023

DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE  No Changes DATE _____

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

B. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR. FRY, SCOTT 3888 NORTHSIDE DR. SUITE B MACON, GA 31210
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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:  1/17/08 (478) 474-4745

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #