2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000027353

Entity Name: LINDSEY DESIGN, INC.

FILED Feb 17, 2006 Secretary of State

Current Principal Place	e of Business:	New Principal Place	New Principal Place of Business:	
12357 BURGESS HILL DRIVE JACKSONVILLE, FL 322464081 US		15081 CAPE DRIVE EAST JACKSONVILLE, FL 322261207 US		
Current Mailing Address:		New Mailing Address:		
12357 BURGESS HILL DRIVE JACKSONVILLE, FL 322464081 US		15081 CAPE DRIVE EAST JACKSONVILLE, FL 322261207 US		
FEI Number: 20-2364186	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of	Current Registered Agent:	Name and Address of	Name and Address of New Registered Agent:	
LINDSEY, MARK E 15081 CAPE DRIVE EA JACKSONVILLE, FL 32				
The above named entity in the State of Florida.	submits this statement for the	purpose of changing its registered	d office or registered agent, or both,	
SIGNATURE:				
Electro	nic Signature of Registered Ag	ent	Date	

Title:

City-St-Zip:

OFFICERS AND DIRECTORS:

Title:

City-St-Zip:

Election Campaign Financing Trust Fund Contribution ().

() Delete

CALLAHAN, FL 320111670 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition

LINDSEY, MARK E LINDSEY, MARK E Name: Name: 12357 BURGESS HILL DRIVE Address: 15081 CAPE DRIVE EAST Address: City-St-Zip: JACKSONVILLE, FL 322464081 US City-St-Zip: JACKSONVILLE, FL 322261207 US Title: DT () Delete Title: (X) Change () Addition LINDSEY, HILARY A LINDSEY, HILARY A Name: Name: Address: 12357 BURGESS HILL DRIVE Address: 15081 CAPE DRIVE EAST JACKSONVILLE, FL 322464081 US JACKSONVILLE, FL 322261207 US City-St-Zip: City-St-Zip: Title: Title: DS () Delete () Change () Addition Name: BLAIR, THOMAS A Name: 54025 JEANNIE ROAD - P O BOX 1670 Address: Address:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARK E. LINDSEY DP 02/17/2006