2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000036406

Entity Name: LA DAUPHINE, LLC

FILED Apr 30, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

3165 MCCRORY PLACE 3165 MCCRORY PLACE SUITE 101 SUITE 151

ORLANDO, FL 32803 ORLANDO, FL 32803

Current Mailing Address: New Mailing Address:

3165 MCCRORY PLACE P O BOX 9916

SUITE 101 CHESAPEAKE, VA 23321 ORLANDO, FL 32803

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

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

JONES, TERI M ESQ
3165 MCCRORY PLACE
SUITE 101
ORLANDO, FL 32803 US

JONES, TERI M ESQ
3165 MCCRORY PLACE
SUITE 151
ORLANDO, FL 32803 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: TERI MICHELLE JONES 04/30/2009

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGRM () Delete Title: MGRM (X) Change () Addition

 Name:
 JONES, TERI M ESQ
 Name:
 JONES, TERI M ESQ

 Address:
 3165 MCCRORY PLACE, STE. 101
 Address:
 P O BOX 9916

 City-St-Zip:
 ORLANDO, FL 32803
 City-St-Zip:
 CHESAPEAKE, VA 23321

Title: MGR () Delete Title: () Change () Addition

 Name:
 JONES, FARRIS M
 Name:

 Address:
 3332 STATION HOUSE ROAD
 Address:

 City-St-Zip:
 CHESAPEAKE, VA 23321
 City-St-Zip:

Title: MGR () Delete Title: () Change () Addition

 Name:
 JONES, ELIZABETH H
 Name:

 Address:
 3332 STATION HOUSE ROAD
 Address:

 City-St-Zip:
 CHESAPEAKE, VA 23321
 City-St-Zip:

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: TERI MICHELLE JONES MGRM 04/30/2009