

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L99000003378

FILED
Jan 15, 2009
Secretary of State

Entity Name: DUNKERLEY ENTERPRISES, LLC.

Current Principal Place of Business:

3941 MCCLELLAN RD
PENSACOLA, FL 32503

New Principal Place of Business:

Current Mailing Address:

PO BOX 30273
PENSACOLA, FL 32503

New Mailing Address:

FEI Number: 59-3582431

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DUNKERLEY, DAVID
3941 MCCLELLAN RD
PENSACOLA, FL 32503 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: DUNKERLEY, DAVID
Address: 3941 MCCLELLAN RD
City-St-Zip: PENSACOLA, FL 32503

Title: MGRM () Delete
Name: DUNKERLEY, DEBORAH J
Address: 3941 MCCLELLAN RD
City-St-Zip: PENSACOLA, FL 32503

Title: MGRM () Delete
Name: CRABTREE, EILEEN
Address: 2605 TAMBRIDGE CIRCLE
City-St-Zip: PENSACOLA, FL 32503

ADDITIONS/CHANGES:

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

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

Title: () Change () Addition
Name:
Address:
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: DAVID DUNKERLEY

MGRM

01/15/2009

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