

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000001236

Entity Name: DEL COMPANY, LLC

FILED
Apr 29, 2005
Secretary of State

Current Principal Place of Business:

12024 DOBBS LANE
SOUTHPORT, FL 32409

New Principal Place of Business:

315 BRIGGS
SOUTHPORT, FL 32409

Current Mailing Address:

PO BOX 1056
LYNN HAVEN, FL 32444

New Mailing Address:

FEI Number: 59-3622590

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DOBBS, DEBORAH H
12024 DOBBS LANE
SOUTHPORT, FL 32409 US

Name and Address of New Registered Agent:

DOBBS, DEBORAH H
315 BRIGGS LANE
SOUTHPORT, FL 32409 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: DEBORAH H. DOBBS

04/29/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: DOBBS, DEBORAH H
Address: 12024 DOBBS LANE
City-St-Zip: SOUTHPORT, FL 32409

Title: MGR () Delete
Name: DOBBS, JACK L
Address: 12024 DOBBS LANE
City-St-Zip: SOUTHPORT, FL 32409

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: DOBBS, DEBORAH H
Address: 315 BRIGGS LANE
City-St-Zip: SOUTHPORT, FL 32409

Title: MGR (X) Change () Addition
Name: DOBBS, JACK L
Address: 315 BRIGGS LANE
City-St-Zip: SOUTHPORT, FL 32409

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: DEBORAH H. DOBBS

MGR

04/29/2005

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