

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000007575

FILED
Apr 24, 2009
Secretary of State

Entity Name: DUST DEVIL ENTERPRISES, LLC

Current Principal Place of Business:

12 WOODLAKE DR.
PORT ORANGE, FL 32129

New Principal Place of Business:

12 WOODLAKE DR.
PORT ORANGE, FL 32129 US

Current Mailing Address:

12 WOODLAKE DR.
PORT ORANGE, FL 32129

New Mailing Address:

FEI Number: 59-3719894 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MARTIN, MARY S
12 WOODLAKE DR.
PORT ORANGE, FL 32129 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: MGR () Delete
Name: MARTIN, MARY S
Address: 12 WOODLAKE DRIVE
City-St-Zip: PORT ORANGE, FL 321294050

Title: MGR () Delete
Name: MARTIN, JOE D
Address: 12 WOODLAKE DRIVE
City-St-Zip: PORT ORANGE, FL 321294050

ADDITIONS/CHANGES:

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: MARY S MARTIN

MGR

04/24/2009

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