


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 25, 2008 08:00 AM
Secretary of State

DOCUMENT # L02000000464
 1. Entity Name
 MCDIRMIT, DAVIS & COMPANY, LLC



Principal Place of Business Mailing Address
 605 ROBINSON STREET, SUITE 635 605 ROBINSON STREET, SUITE 635
 ORLANDO, FL 32801 ORLANDO, FL 32801

DO NOT WRITE IN THIS SPACE



02212008 No Chg-LLC CR2E083 (12/07)

4. FEI Number Applied For
 26-0004117 Not Applicable

5. Certificate of Status Desired \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent
 MCDIRMIT, ELDEN G
 605 E ROBINSON STREET, STE. 635
 ORLANDO, FL 32801

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8. 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. I am familiar with, and accept the obligations of registered agent.
 SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

U00000836794
 03/04/08-80032-003 138.75

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MCDIRMIT, ELDEN G 605 E. ROBINSON STREET, STE 635 ORLANDO, FL 32801
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST DAVIS, EUGENE R 605 E. ROBINSON STREET, STE 635 ORLANDO, FL 32801
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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: Elden G. MCD 2/21/08
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #