


2005 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

FILED
May 02, 2005 8:00 am
Secretary of State

05-02-2005 90113 050 ****50.00

DOCUMENT # L02000002491	
1. Entity Name DMF, LLC	

Principal Place of Business 7727 CARRICK COURT ORLANDO FL 32835	Mailing Address P.O. BOX 490744 LEESBURG FL 34749-0744
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2. Principal Place of Business 32334 Oak Park Dr.	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.

1st MOORE CR2E083 (10/04)

City & State Leesburg, FL	City & State
Zip 34748	Country U.S.

4. FEI Number 56-2454361	Applied For <input type="checkbox"/> Not Applicable
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6. Name and Address of Current Registered Agent FAGAN, DAVID M 7727 CARRICK COURT ORLANDO FL 32835	7. Name and Address of New Registered Agent Name David M. Fagan Street Address (P.O. Box Number is Not Acceptable) 32334 Oak Park Drive City Leesburg FL Zip Code 34748
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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 	DATE 4-26-05
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FILE NOW!!! FEE IS \$50.00
Make Check Payable to Florida Department of State
Due By May 1, 2005

9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR FAGAN, DAVID M 7727 CARRICK COURT ORLANDO FL 32835 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR David M. Fagan 32334 Oak Park Drive Leesburg, FL 34748 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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11. I hereby certify that the information supplied with this filing does not qualify 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 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 Fagan	DATE: 4-26-05 (407) 497-0224
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