

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000002777

FILED
Jan 31, 2008
Secretary of State

Entity Name: DEAN MEAD SERVICES, LLC

Current Principal Place of Business:

800 NORTH MAGNOLIA AVE.
SUITE 1500
ORLANDO, FL 328033276

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 2346
ORLANDO, FL 328022346

New Mailing Address:

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

Name and Address of Current Registered Agent:

BLOODWORTH, DARRYL M
800 NORTH MAGNOLIA AVE.
SUITE 1500
ORLANDO, FL 328033276 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: DEAN, MEAD, EGERTON,, BLOODWORTH,
Address: 800 N. MAGNOLIA AVE., SUITE 1500
City-St-Zip: ORLANDO, FL 32803

ADDITIONS/CHANGES:

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: DARRYL M. BLOODWORTH MGRM 01/31/2008

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