

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000009682

Entity Name: DAVLEN, L.L.C.

FILED
May 08, 2006
Secretary of State

Current Principal Place of Business:

222 WEST BAY DR.
LARGO, FL 33770

New Principal Place of Business:

Current Mailing Address:

PO BOX 1679
LARGO, FL 337791679

New Mailing Address:

FEI Number: 75-3046994 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

PAPPAS, GEORGE G
901 N. HERCULES AVE., STE. D
CLEARWATER, FL 33765 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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: FLEEMAN, DAVID
Address: 509 4TH AVE. NE
City-St-Zip: LARGO, FL 33770

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: FLEEMAN, DAVID A
Address: 513 4TH AVE. NE
City-St-Zip: LARGO, FL 33770

Title: MBR () Change (X) Addition
Name: FLEEMAN, ROBERT L
Address: 509 4TH AVE. NE
City-St-Zip: LARGO, FL 33770

Title: MBR () Change (X) Addition
Name: FLEEMAN, CAROLE L
Address: 513 4TH AVE. NE
City-St-Zip: LARGO, FL 33770

Title: MBR () Change (X) Addition
Name: FLEEMAN, HOPE D
Address: 509 4TH AVE. NE
City-St-Zip: LARGO, FL 33770

I hereby certify that the information supplied with this filing does not qualify for the 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: DAVID FLEEMAN

MGRM

05/08/2006

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