

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000020141

FILED
Jan 14, 2009
Secretary of State

Entity Name: DOLMENS DEVELOPMENT LLC

Current Principal Place of Business:

227 NE ARBOR AVE
PORT SAINT LUCIE, FL 34952

New Principal Place of Business:

227 E ARBOR AVE
PORT SAINT LUCIE, FL 34952

Current Mailing Address:

PO BOX 8542
PORT SAINT LUCIE, FL 34985

New Mailing Address:

227 E ARBOR AVE
PORT SAINT LUCIE, FL 34952

FEI Number: 54-2074014

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RE, HECTOR
227 NE ARBOR AVE
PORT SAINT LUCIE, FL 34952 US

Name and Address of New Registered Agent:

RE, HECTOR
227 E ARBOR AVE
PORT ST. LUCIE, FL 34952 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:

01/14/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MR () Delete
Name: RE, HECTOR
Address: 227 NE ARBOR AVE
City-St-Zip: PORT SAINT LUCIE, FL 34952

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: RE, HECTOR
Address: 227 E ARBOR AVE
City-St-Zip: PORT SAINT LUCIE, FL 34952

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: HECTOR RE

MGRM

01/14/2009

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