


**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
May 01, 2006 08:00 AM
Secretary of State

| | |
|---|---|
| DOCUMENT # L02000022278 1. Entity Name DALESMEN PROPERTY SERVICES, L.L.C. |  |
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|---|---|
| Principal Place of Business 3337 PELLAM BLVD PORT CHARLOTTE, FL 33948 US | Mailing Address 3337 PELLAM BLVD PORT CHARLOTTE, FL 33948 US |
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DO NOT WRITE IN THIS SPACE



03252006 No Chg-LLC

CR2E083 (11/05)

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|------------------------------------|-------------------------------|
| 4. FEI Number 46-0498647 | Applied For Not Applicable |
|------------------------------------|-------------------------------|

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|---|---------------------------------------|
| 5. Certificate of Status Desired <input type="checkbox"/> | \$5.00 Additional Fee Required |
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| 6. Name and Address of Current Registered Agent SMITH, JOSIAH 3337 PELLAM BLVD. PORT CHARLOTTE, FL 33948 |
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IN THIS SPACE**

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.

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|--|---|------------|
| SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable</small> | (NOTE: Registered Agent signature required when reappointing) | DATE _____ |
|--|---|------------|

**Filing Fee is \$50.00
Due by May 1, 2006**

| 9. MANAGING MEMBERS/MANAGERS | |
|--|---|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | M JUBB, KEVIN 3337 PELLAM BLVD. PORT CHARLOTTE, FL 33948 |
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05/12/06-80011-002 50.00

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.

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|---|---------------------------------------|--------------------------------|
| SIGNATURE: <u>X I E Smith</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE</small> | <u>3/27/06</u> <small>Date</small> | <small>Daytime Phone #</small> |
|---|---------------------------------------|--------------------------------|