

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000010328

Entity Name: DEFNE, LLC

FILED  
Feb 26, 2007  
Secretary of State

**Current Principal Place of Business:**

9505 SW 75TH ST.  
GAINESVILLE, FL 32608 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 140995  
GAINESVILLE, FL 32614 US

**New Mailing Address:**

9505 SW 75 STREET  
GAINESVILLE, FL 32608 US

FEI Number: 51-0453940

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

YAYLALI, LEVEND  
PO BOX 140995  
GAINESVILLE, FL 32614 US

**Name and Address of New Registered Agent:**

YAYLALI, LEVENT  
9505 SW 75 STREET  
GAINESVILLE, FL 32608 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: LEVENT YAYLALI

02/26/2007

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: YAYLALI, LEVEND  
Address: PO BOX 140995  
City-St-Zip: GAINESVILLE, FL 32614

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: YAYLALI, LEVENT  
Address: 9505 SW 75TH STREET  
City-St-Zip: GAINESVILLE, FL 32608

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: LEVENT YAYLALI

PRES

02/26/2007

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