




# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Mar 08, 2006 8:00 am**  
**Secretary of State**

03-08-2006 90045 036 \*\*\*\*\*55.00

<b>DOCUMENT # L03000016964</b> 1. Entity Name <b>DABCO, LLC</b>					
Principal Place of Business <b>8135 25TH STREET VERO BEACH, FL 32966</b>			Mailing Address <b>8135 25TH STREET VERO BEACH, FL 32966</b>		
2. Principal Place of Business <b>5976 20th ST. Suite, Apt. #, etc. #70</b>		3. Mailing Address <b>5976 20th ST. Suite, Apt. #, etc. #70</b>		  02142006 Chg-LLC CR2E083 (11/05)	
City & State <b>Vero Beach, FL</b>		City & State <b>Vero Beach, FL</b>			
Zip <b>32966</b>		Country <b>USA</b>			
4. FEI Number <b>56-2363141</b>		Applied For <input type="checkbox"/> Not Applicable			
5. Certificate of Status Desired <input checked="" type="checkbox"/> <b>\$5.00 Additional Fee Required</b>					
6. Name and Address of Current Registered Agent  <b>DABNEY, JOHN W 8135 25TH STREET VERO BEACH, FL 32966</b>					
7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) <b>5976 20th ST #70</b> City <b>Vero Beach</b> FL Zip Code <b>32966</b>					
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.					
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
<b>Filing Fee is \$50.00 Due by May 1, 2006</b>				<b>Make check payable to Florida Department of State</b>	
<div style="display: flex; justify-content: space-between;"> <div style="width: 48%;"> <b>9. MANAGING MEMBERS/MANAGERS</b> </div> <div style="width: 48%;"> <b>10. ADDITIONS/CHANGES</b> </div> </div>					
TITLE	MGRM <input type="checkbox"/> Delete	TITLE	(Same) <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	DABNEY, JOHN W	NAME	(Same)		
STREET ADDRESS	8135 25TH ST	STREET ADDRESS	5976 20th ST #70		
CITY-ST-ZIP	VERO BEACH, FL 32966	CITY-ST-ZIP	Vero Beach, FL 32966		
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME		NAME			
STREET ADDRESS		STREET ADDRESS			
CITY-ST-ZIP		CITY-ST-ZIP			
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME		NAME			
STREET ADDRESS		STREET ADDRESS			
CITY-ST-ZIP		CITY-ST-ZIP			
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME		NAME			
STREET ADDRESS		STREET ADDRESS			
CITY-ST-ZIP		CITY-ST-ZIP			
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME		NAME			
STREET ADDRESS		STREET ADDRESS			
CITY-ST-ZIP		CITY-ST-ZIP			
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.					
<b>SIGNATURE: John W. Dabney</b>  <b>5/1/06 772-713-5725</b> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #</small>					