

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000018865

FILED
Apr 19, 2007
Secretary of State

Entity Name: DOVARWOOD INVESTMENTS, LLC

Current Principal Place of Business:

5155 DEESON POINTE CT.
LAKELAND, FL 33805

New Principal Place of Business:

Current Mailing Address:

5155 DEESON POINTE CT.
LAKELAND, FL 33805

New Mailing Address:

3101 HIGHLANDS BY THE LAKE WAY
LAKELAND, FL 33812

FEI Number: 56-2368103

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DOVIK, RICHARD
5155 DEESON POINTE CT.
LAKELAND, FL 33805 US

Name and Address of New Registered Agent:

DOVIK, RICHARD
5155 DEESON POINTE CT.
LAKELAND, FL 33805 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:

04/19/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: DOVIK, RICHARD J
Address: 5155 DEESON POINTE CT.
City-St-Zip: LAKELAND, FL 33805

Title: MGRM () Delete
Name: VARGAS, DAVID J
Address: 3526 S. FLORIDA AVE.
City-St-Zip: LAKELAND, FL 33803

Title: MGRM () Delete
Name: WOODY, JOHN D
Address: 8633 VISTA SHORES CT.
City-St-Zip: ORLANDO, FL 32836

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGRM (X) Change () Addition
Name: VARGAS, DAVID J
Address: 3101 HIGHLANDS BY THE LAKE WAY
City-St-Zip: LAKELAND, FL 33812

Title: MGRM (X) Change () Addition
Name: WOODY, JOHN D
Address: 8633 VISTA SHORES CT.
City-St-Zip: ORLANDO, FL

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 J. VARGAS, MD

MGRM

04/19/2007

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