

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000028622

FILED
Apr 19, 2007
Secretary of State

Entity Name: DAVETTE ENTERPRISE, L.L.C.

Current Principal Place of Business:

204 SE 16TH PLACE
CAPE CORAL, FL 33990

New Principal Place of Business:

Current Mailing Address:

204 SE 16TH PLACE
CAPE CORAL, FL 33990

New Mailing Address:

FEI Number: 20-0412983

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MACKOUL, DAVID
204 SE 16TH PLACE
CAPE CORAL, FL 33990 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: P () Delete
Name: MACKOVL, DAVID A MD
Address: 1901 SE 26TH TERR
City-St-Zip: CAPE CORAL, FL 33904

Title: VP () Delete
Name: ST.PIERRE-MACKOVL, ANNETTE MD
Address: 1901 SE 26TH TERR
City-St-Zip: CAPE CORAL, FL 33904

ADDITIONS/CHANGES:

Title: P (X) Change () Addition
Name: MACKOUL, DAVID A MD
Address: 1901 SE 26TH TERR
City-St-Zip: CAPE CORAL, FL 33904

Title: VP (X) Change () Addition
Name: ST.PIERRE-MACKOUL, ANNETTE MD
Address: 1901 SE 26TH TERR
City-St-Zip: CAPE CORAL, FL 33904

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 A. MACKOUL

P

04/19/2007

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