2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000032302

Entity Name: CDM HOLDINGS, LLC

FILED Apr 30, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

16007 N. FLORIDA AVE. LUTZ, FL 33549

Current Mailing Address: New Mailing Address:

16007 N. FLORIDA AVE. LUTZ, FL 33549

FEI Number: 20-0183444 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

FOWLER WHITE BOGGS BANKER P.A. 501 E. KENNEDY BLVD, STE. 1700 ATTN: R. ALAN HIGBEE TAMPA, FL 33602 US

16007 N FLORIDA AVE LUTZ, FL 33549

SCOTSON, RONALD B

ADDITIONS/CHANGES:

MGRM

MORSANI, FRANK L

LUTZ, FL 33549

16007 N FLORIDA AVE

(X) Change () Addition

Title:

Name:

Address:

City-St-Zip:

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: RONALD B SCOTSON 04/30/2007

> Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

MGR () Delete

HIGBEE, R. ALAN Name:

Address: 501 E. KENNEDY BLVD., SUITE 1700

City-St-Zip: TAMPA, FL 33602

Title: Title: () Change (X) Addition () Delete MORSANI FAMILY RECEP, TACLE TRUST Name: Name:

Address: Address: 16007 N FLORIDA AVE City-St-Zip: City-St-Zip: LUTZ, FL 33549

I hereby certify that the information supplied with this filing does not qualify 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: FRANK L MORSANI **MGRM** 04/30/2007