

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000036141

FILED
Jul 10, 2007
Secretary of State

Entity Name: DEVONNE'S LLC

Current Principal Place of Business:

601 N CONGRESS AVENUE
BLDG.4, STE 426
DELRAY BEACH, FL 33445

New Principal Place of Business:

Current Mailing Address:

301 NORTH CONGRESS AVENUE
BLDG.4, STE 426
DELRAY BEACH, FL 33445

New Mailing Address:

601 NORTH CONGRESS AVENUE
BLDG.4, STE 426
DELRAY BEACH, FL 33445

FEI Number: 20-3838276 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

HERRINGTON, DEVONNE
316 SOUTH SWINTON AVE.
DELRAY BEACH, FL 33444 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: MGR () Delete
Name: HERRINGTON, DEVONNE
Address: 316 SOUTH SWINTON AVE.
City-St-Zip: DELRAY BEACH, FL 33444

Title: MGRM () Delete
Name: WRIGHT, DANIEL L
Address: 316 SOUTH SWINTON AVENUE
City-St-Zip: DELRAY BEACH, FL 33444

Title: MGRM () Delete
Name: HENFIELD, CLIFFORD
Address: 316 SOUTH SWINTON AVENUE
City-St-Zip: DELRAY BEACH, FL 33444

ADDITIONS/CHANGES:

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

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

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

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: DEVONNE HERRINGTON

OWNE

07/10/2007

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