## 2005 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

## Apr 13, 2005 8:00 am Secretary of State **DOCUMENT # L03000036418** 04-13-2005 90220 016 \*\*\*\*50.00 1. Entity Name THE DARMER CO., LLC Principal Place of Business Mailing Address ՀՍՍԱհԱՄՄ 410 MARINER DRIVE 410 MARINER DRIVE JUPITER, FL 33477 JUPITER, FL 33477 2. Principal Place of Business 3. Mailing Address 106 CENTRAL PARK SO 13260 SABAL CHASE Suite, Apt. #, etc. Suite, Apt. #, etc. 04012005 Chg-LLC CR2E083 (10/03) City & State City & State 4. FEI Number Applied For PALM BEACH GARDENS 02-0707284 NEW YORK, Not Applicable Country \$5.00 Additional 5. Certificate of Status Desired 10019 33418 Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent DOLAN, KENNETH Street Address (P.O. Box Number is Not Acceptable) 410 MARINER DRIVE C/O DARMER CO., LLC JUPITER, FL 33477 13260 SABAL CHASE PALM BEACH GARDENS 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 Signature, typed or printed name of register Filing Fee is \$50.00 Due by May 1, 2005 Make check payable to Florida Department of State MANAGING MEMBERS/MANAGERS ADDITIONS/CHANGES 9. 10. **MGRM** TITLE TITLE The Change ☐ Addition ☐ Delete NAME DOLAN, KENNETH 13260 SABAL CHASE NAME 410 MARINER DRIVE STREET ADDRESS STREET ADDRESS PALM BEACH GARDENS, FL 33418 CITY-ST-ZIP JUPITER, FL 33477 CITY-ST-7IP ☐ Change TITLE ☐ Delete TITLE . ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Detete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP -TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE ☐ Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE TITLE ☐ Change Addition 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 exemption stated in Section 119.07(3)(i), 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 eceiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

**FILED**