

# **2005 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000009013

**FILED**  
**May 19, 2005**  
**Secretary of State**

**Entity Name:** DEDHAM INVESTMENTS, LLC

**Current Principal Place of Business:**

1504 DAMON AVENUE  
KISSIMMEE, FL 34744

**New Principal Place of Business:**

**Current Mailing Address:**

1504 DAMON AVENUE  
KISSIMMEE, FL 34744

**New Mailing Address:**

**FEI Number:** 80-0094148      **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:**

DEPARI, CHARLES ROBERT JR.  
1504 DAMON AVENUE  
KISSIMMEE, FL 34744      US

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

DEPARI, CHARLES R JR.  
1504 DAMON AVENUE  
KISSIMMEE, FL 34744      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: CHARLES R. DEPARI, JR.

05/19/2005

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MEMBERS:**

Title: MGRM      ( ) Delete  
Name: DEPARI, CHARLES ROBERT JR.  
Address: 1504 DAMON AVENUE  
City-St-Zip: KISSIMMEE, FL 34744

**ADDITIONS/CHANGES:**

Title: MGRM      (X) Change      ( ) Addition  
Name: DEPARI, CHARLES R JR.  
Address: 1504 DAMON AVENUE  
City-St-Zip: KISSIMMEE, FL 34744 US

I hereby certify that the information supplied with this filing does not qualify for the 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 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: CHARLES R. DEPARI, JR.

MGRM

05/19/2005

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