2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 22, 2007
Secretary of State

DOCUMENT# L04000036276

Entity Name: FIREFLY DOMESTIC, LLC

Current Principal Place of Business:

1123 OVERCASH DRIVE
DUNEDIN, FL 34698

New Principal Place of Business:

2410 NORTHSIDE DR
CLEARWATER, FL 33761

Current Mailing Address:

1123 OVERCASH DRIVE
DUNEDIN, FL 34698

New Mailing Address:

2410 NORTHSIDE DR
CLEARWATER, FL 33761

FEI Number: 20-1888005 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

POWERS, BARRY C
1123 OVERCASH DRIVE
DUNEDIN, FL 34698 US

Name and Address of New Registered Agent:

SASSONE, MARTHA E CFO
2410 NORTHSIDE DR
CLEARWATER, FL 33761 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: MARTHA SASSONE 01/22/2007
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title:	MGR	( ) Delete
Name:	COIA, DAVID S	
Address:	1123 OVERCASH DRIVE	
City-St-Zip:	DUNEDIN, FL 34698	
Title:	MGR	( ) Delete
Name:	ARCHER, SCOTT	
Address:	15974 N 77TH STREET	
City-St-Zip:	SCOTTSDALE, AZ 85260	
Title:	MGR	( ) Delete
Name:	SURRENCY, JEFFERY T	
Address:	1123 OVERCASH DRIVE	
City-St-Zip:	DUNEDIN, FL 34698	
Title:	MGR	( ) Delete
Name:	VIETTO, DANIEL L	
Address:	1123 OVERCASH DRIVE	
City-St-Zip:	DUNEDIN, FL 34698	
Title:	MGR	(X) Delete
Name:	POWERS, BARRY C	
Address:	1123 OVERCASH DRIVE	
City-St-Zip:	DUNEDIN, FL 34698	

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:	
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 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: MARTHA SASSONE CFO 01/22/2007
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date