

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000037550

Entity Name: DND FLORENCE LLC

FILED
Apr 03, 2007
Secretary of State

Current Principal Place of Business:

C/O MICHAEL DAVIDSON
17615 GLADYS STREET
MONTVERDE, FL 34736

New Principal Place of Business:

Current Mailing Address:

C/O MICHAEL DAVIDSON
17615 GLADYS STREET
MONTVERDE, FL 34736

New Mailing Address:

FEI Number: 20-2377457

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NIX, ARTHUR C
17550 C.R. 455
MONTVERDE, FL 34756 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: P () Delete
Name: DAVIDSON, MICHAEL
Address: 17615 GLADYS STREET
City-St-Zip: MONTVERDE, FL 34736

Title: S () Delete
Name: NIX, ARTHUR C
Address: 17550 C.R. 455
City-St-Zip: MONTVERDE, FL 3475Q

Title: T () Delete
Name: DONOFRIO, WALTER J
Address: 17612 GLADYS STREET
City-St-Zip: MONTVERDE, FL 34736

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 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: ARTHUR C. NIX

MRG

04/03/2007

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