

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000041861

Entity Name: DOVE, L.L.C.

FILED
Jan 31, 2007
Secretary of State

Current Principal Place of Business:

2916 NORTH OCEAN BOULEVARD
FORT LAUDERDALE, FL 33308 US

New Principal Place of Business:

Current Mailing Address:

1500 NORTH FEDERAL HIGHWAY
STE. 200
FORT LAUDERDALE, FL 33304 US

New Mailing Address:

2400 E. LAS OLAS BLVD
SUITE A
FORT LAUDERDALE, FL 33301 US

FEI Number: 77-0636918

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BENJAMIN E. OLIVE, P.A.
1500 NORTH FEDERAL HIGHWAY
STE. 200
FORT LAUDERDALE, FL 33304 US

Name and Address of New Registered Agent:

OLIVE & ASSOCIATES, P.A.
2400 E. LAS OLAS BLVD
SUITE A
FORT LAUDERDALE, FL 33301 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: BENJAMIN E. OLIVE

01/31/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: OLIVE, BENJAMIN E
Address: 1500 NORTH FEDERAL HIGHWAY, STE. 200
City-St-Zip: FORT LAUDERDALE, FL 33304 US

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: OLIVE, BENJAMIN E
Address: 2400 E. LAS OLAS BLVD SUITE A
City-St-Zip: FORT LAUDERDALE, FL 33301 US

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: BENJAMIN E. OLIVE

MGR

01/31/2007

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