2007 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

DO NOT WRITE IN THIS SPACE

DOCUMENT # L04000053125 1. Entity Name ALL AROUND DAVE LLC



FILED Jan 23, 2007 08:00 AM **Secretary of State**

Principal Place of Business

Mailing Address

212 EAST HOLLY DRIVE ORANGE CITY, FL 32763 212 EAST HOLLY DRIVE

ORANGE CITY, FL 32763 US

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01062007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 20-1402500

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

BURKEY, DAVID A 212 EAST HOLLY DRIVE ORANGE CITY, FL 32783

NAME STREET ADDRESS CITY-ST-ZIP

DO NOT WRITE IN THIS SPACE

		"	ITIIO OI AOL
8. The above the obligat	named entity submits this statement for the purpose of char tions of registered agent.	nging its registered office or registered agent, or bo	oth, in the State of Florida. I am familiar with, and accept
SIGNATURE.	Signature, typed or printed name of registered agent and site if epplicable.	(NOTE: Registered Agent signature required when reinstating)	DATE
F	iling Fee is \$50.00 ue by May 1, 2007		
9.	MANAGING MEMBERS/MANAGERS		M
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR BURKEY, DAVID A 212 EAST HOLLY DRIVE ORANGE CITY, FL 32763		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			000000599670 01/25/07-80037-002 55.00
TIFLE NAME STREET ADDRESS CITY-ST-ZIP		DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN '	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE			

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: OR AUTHORIZED REPRESENTATIVE