2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jun 27, 2009
Secretary of State

DOCUMENT# L04000071216

Entity Name: DODEWILL SALES, LLC

Current Principal Place of Business:

11200 SW 128 AVE
DUNNELLON, FL 34432 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 4177
BELLEVIEW, FL 34421 US

New Mailing Address:

FEI Number: 20-1697790 **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:

CRAWFORD, DONALD S
11200 SW 128 AVE
DUNNELLON, FL 34432 US

Name and Address of New Registered Agent:

CRAWFORD, DONALD S MGRM
11200 SW 128 AVE
DUNNELLON, FL 34432 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: DONALD S CRAWFORD 06/27/2009
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: CRAWFORD, DONALD S
Address: 11200 SW 128 AVE
City-St-Zip: DUNNELLON, FL 34432 US

Title: M ( ) Delete
Name: WOLSEFER, KISEL H
Address: 1530 WESTCOTT LOOP
City-St-Zip: WINTER SPRINGS, FL 32708

ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: MGR (X) Change ( ) Addition
Name: WOLSEFER, KISEL H
Address: 1530 WESTCOTT LOOP
City-St-Zip: WINTER SPRINGS, FL 32708

I hereby certify that the information supplied with this filing does not qualify 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: DONALD S CRAWFORD MGRM 06/27/2009
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date