2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000073963

Title:

Name:

Address:

City-St-Zip:

Entity Name: DNA TOWN CENTER DEVELOPMENT LLC

() Delete

FILED Apr 30, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 101 EAST KENNEDY BOULEVARD, SUITE 4000 16506 POINTE VILLAGE DRIVE TAMPA, FL 33602 SUITE 201 LUTZ, FL 33558 **Current Mailing Address:** New Mailing Address: 16506 POINTE VILLAGE DRIVE 101 EAST KENNEDY BOULEVARD, SUITE 4000 TAMPA, FL 33602 US SUITE 201 LUTZ, FL 33558 US FEI Number: 20-1776352 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MILLS, RAYMOND E MILLS, RAYMOND E 16506 POINTE VILLAGE DRIVE 101 EÁST KENNEDY BOULEVARD, SUITE 4000 TAMPA, FL 33602 SUITE 201 LUTZ, FL 33558 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: 04/30/2007 Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: Title: () Delete (X) Change () Addition HOGAN OVIEDO JOINT V, ENTURE, LLC MILLS, RAYMOND E Name: Name: 101 E. KENNEDY BLVD. SUITE 4000 Address: 16506 POINTE VILLAGE DRIVE SUITE 201 Address: City-St-Zip: TAMPA, FL 33602 City-St-Zip: LUTZ, FL 33558 Title: Title: () Change (X) Addition () Delete Name: Name: REBACK, DEBRA J Address: Address: 16506 POINTE VILLAGE DRIVE SUITE 201 City-St-Zip: City-St-Zip: LUTZ, FL 33558 Title: () Delete Title: SEC () Change (X) Addition REBACK, DEBRA J Name: Name: 16506 POINTE VILLAGE DRIVE SUITE 201 Address: Address: City-St-Zip: City-St-Zip: LUTZ. FL 33558

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.

Title:

Name:

Address:

City-St-Zip:

TRS

REBACK, DEBRA J

LUTZ, FL 33558

() Change (X) Addition

16506 POINTE VILLAGE DRIVE SUITE 201

SIGNATURE: RAYMOND E MILLS P 04/30/2007