

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000079136

Entity Name: DAWN HOLDINGS LLC

FILED
Apr 23, 2007
Secretary of State

Current Principal Place of Business:

2518 NE 20 PLACE
CAPE CORAL, FL 33909

New Principal Place of Business:

2518 NE 20TH PLACE
CAPE CORAL, FL 33909

Current Mailing Address:

2518 NE 20 PLACE
CAPE CORAL, FL 33909

New Mailing Address:

2518 NE 20TH PLACE
CAPE CORAL, FL 33909

FEI Number: 11-3732220

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STECKELBERG, DAWN
2518 NE 20 PLACE
CAPE CORAL, FL 33909 US

Name and Address of New Registered Agent:

STECKELBERG, DAWN
2518 NE 20TH PLACE
CAPE CORAL, FL 33909 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: DAWN STECKELBERG

04/23/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: STECKELBERG, DAWN
Address: 2518 NE 20 PLACE
City-St-Zip: CAPE CORAL, FL 33909

Title: MGRM () Delete
Name: STECKELBERG, STEVE
Address: 2518 NE 20 PLACE
City-St-Zip: CAPE CORAL, FL 33909

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: STECKELBERG, DAWN
Address: 2518 NE 20TH PLACE
City-St-Zip: CAPE CORAL, FL 33909

Title: MGRM (X) Change () Addition
Name: STECKELBERG, STEVE
Address: 2518 NE 20TH PLACE
City-St-Zip: CAPE CORAL, FL 33909

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: DAWN STECKELBERG

MGRM

04/23/2007

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