

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000085429

Entity Name: DUFCON, LLC

FILED
Jan 31, 2007
Secretary of State

Current Principal Place of Business:

1201 S. HIGHLAND AVE.
10
CLEARWATER, FL 33756 US

New Principal Place of Business:

Current Mailing Address:

1201 S. HIGHLAND AVE.
10
CLEARWATER, FL 33756 US

New Mailing Address:

FEI Number: 20-1933877

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DUFALA, CHRISTOPHER J
3439 NORTHRIDGE DR.
CLEARWATER, FL 33761 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: DUFALA, CHRISTOPHER J
Address: 3439 NORTHRIDGE DRIVE
City-St-Zip: CLEARWATER, FL 33761 US

Title: MGR () Delete
Name: DUFALA, NICOLE L
Address: 3439 NORTHRIDGE DRIVE
City-St-Zip: CLEARWATER, FL 33761 US

ADDITIONS/CHANGES:

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

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

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: CHRISTOPHER J DUFALA

MGR

01/31/2007

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