

# 2007 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L05000024645

**FILED**  
**Oct 29, 2007**  
**Secretary of State**

**Entity Name:** DUMORNE FINANCIAL SERVICES, LLC

**Current Principal Place of Business:**

8551 SUNRISE BLVD  
105A  
HOLLYWOOD, FL 33322

**New Principal Place of Business:**

8551 SUNRISE BLVD  
105A  
SUNRISE, FL 33322

**Current Mailing Address:**

11110 W OAKLAND PARK BLVD  
318  
SUNRISE, FL 33351

**New Mailing Address:**

**FEI Number:** 20-2498703      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

DUMORNE, DENNIS  
11110 W OAKLAND PARK BLVD  
SUNRISE, FL 33351      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: DUMORNE, DENNIS  
Address: 11110 W OAKLAND PARK BLVD  
City-St-Zip: SUNRISE, FL 33351

**ADDITIONS/CHANGES:**

Title: MGR      (X) Change      ( ) Addition  
Name: FANOR, JOCELYN  
Address: 8551 SUNRISE BLVD  
City-St-Zip: SUNRISE, FL 33322

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: JOCELYN FANOR

PRES

10/29/2007

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