

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000028059

Entity Name: DF DEVELOPMENTS, LLC

FILED
May 01, 2006
Secretary of State

Current Principal Place of Business:

16305 WORCHESTER PALMS CT.
TAMPA,, FL 33647 US

New Principal Place of Business:

1813 E 18TH AVE
TAMPA,, FL 33605 US

Current Mailing Address:

16305 WORCHESTER PALMS CT.
TAMPA,, FL 33647 US

New Mailing Address:

1813 E 18TH AVE
TAMPA,, FL 33605 US

FEI Number: 84-1675619 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:

FARCHIONE, JAIMON
3822 W SAN PEDRO ST
TAMPA, FL 33629 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: MGRM () Delete
Name: DOHRMAN, THOMAS H
Address: 16305 WORCHESTER PALMS CT.
City-St-Zip: TAMPA, FL 33647 US

Title: MGRM () Delete
Name: FARCHIONE, JAIMON
Address: 3822 W SAN PEDRO ST
City-St-Zip: TAMPA, FL 33629 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: DOHRMAN, THOMAS H
Address: 1813 E 18TH AVE
City-St-Zip: TAMPA, FL 33605 US

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: JAIMON FARCHIONE

MGRM

05/01/2006

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