

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000030705

FILED
Jan 05, 2009
Secretary of State

Entity Name: DAVELU, L.L.C.

Current Principal Place of Business:

759 SOUTH FEDERAL HIGHWAY
SUITE 304
STUART, FL 34994

New Principal Place of Business:

Current Mailing Address:

759 SOUTH FEDERAL HIGHWAY
SUITE 304
STUART, FL 34994

New Mailing Address:

FEI Number: 20-3430155

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CHRISTENSON, DAVID
759 SOUTH FEDERAL HIGHWAY, SUITE 302
STUART, FL 34994 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: CHRISTENSON, DAVID
Address: 759 SOUTH FEDERAL HIGHWAYM SUITE 304
City-St-Zip: STUART, FL 34994

Title: MGRM () Delete
Name: CHRISTENSON, LUCILLE
Address: 759 SOUTH FEDERAL HIGHWAY, SUITE 304
City-St-Zip: STUART, FL 34994

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: CHRISTENSON, DAVID A MGRM
Address: 759 SOUTH FEDERAL HIGHWAYM SUITE 304
City-St-Zip: STUART, FL 34994

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

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: DAVID CHRISTENSON

MGRM

01/05/2009

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