

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 26, 2007 08:00 AM
Secretary of State

DOCUMENT # L05000034361

1. Entity Name
DMM, LLC



Principal Place of Business
**591 CHIPPING LANE
 LONGBOAT KEY, FL 34228**

Mailing Address
**591 CHIPPING LANE
 LONGBOAT KEY, FL 34228**

DO NOT WRITE IN THIS SPACE



03152007No Chg-LLC CR2E083 (11/05)

4. FEI Number
20-2639672 Applied For
 Not Applicable

5. Certificate of Status Desired **\$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

**BROWNING, ROBERT W JR
 ONE NORTH TUTTLE AVE.
 SARASOTA, FL 34237**

DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**Filing Fee is \$50.00
 Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	DAVISSON, WALTER F
STREET ADDRESS	990 BLVD. OF THE ARTS, UNIT 602
CITY-ST-ZIP	SARASOTA, FL 34236
TITLE	MGRM
NAME	SHARON RYAN DAVISSON
STREET ADDRESS	990 BLVD. OF THE ARTS, UNIT 602
CITY-ST-ZIP	SARASOTA, FL 34236
TITLE	MGRM
NAME	MARIOTTI, WILLIAM
STREET ADDRESS	990 BLVD. OF THE ARTS, UNIT 602
CITY-ST-ZIP	SARASOTA, FL 34236
TITLE	MGRM
NAME	MCGONIGLE, JAMES
STREET ADDRESS	591 CHIPPING LANE
CITY-ST-ZIP	LONGBOAT KEY, FL 34228
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

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 04/03/07-80011-015 50.00

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: WALTER F. DAVISSON Walter F. Davison 22 Mar 07 941-330-1924

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Day-time Phone #