

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000048333

**FILED**  
**Apr 30, 2009**  
**Secretary of State**

**Entity Name:** BALLENGER & DALLMANN, LLC

**Current Principal Place of Business:**

2525 COCONUT DRIVE  
COCOA, FL 32926

**New Principal Place of Business:**

**Current Mailing Address:**

2525 COCONUT DRIVE  
COCOA, FL 32926

**New Mailing Address:**

FEI Number: 20-2882755

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

DALLMANN, THOMAS S  
2525 COCONUT DRIVE  
COCOA, FL 32926 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: P ( ) Delete  
Name: DALLMANN, THOMAS S  
Address: 2525 COCONUT DRIVE  
City-St-Zip: COCOA, FL 32926

Title: VP ( ) Delete  
Name: BALLINGER, ALBERT S  
Address: 2523 COCONUT DR  
City-St-Zip: COCOA, FL 32926

**ADDITIONS/CHANGES:**

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

Title: VP (X) Change ( ) Addition  
Name: BALLENGER, ALBERT S  
Address: 2523 COCONUT DR  
City-St-Zip: COCOA, FL 32926

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: THOMAS S. DALLMANN

P

04/30/2009

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