

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000053444

**FILED**  
**Apr 14, 2010**  
**Secretary of State**

**Entity Name:** DREAMCATCHER EXPLORATIONS LLC

**Current Principal Place of Business:**

25 CAUSEWAY BLVD  
CLEARWATER, FL 33767

**New Principal Place of Business:**

25 CAUSEWAY BLVD  
SLIP 32  
CLEARWATER, FL 33767

**Current Mailing Address:**

1016 STONEFENCE WAY  
TARPON SPRINGS, FL 34689

**New Mailing Address:**

**FEI Number:** 20-3296005      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

TROCHE, MICHAEL  
1016 STONEFENCE WAY  
TARPON SPRINGS, FL 34689      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  
**Name:** TROCHE, MICHAEL  
**Address:** 1016 STONEFENCE WAY  
**City-St-Zip:** TARPON SPRINGS, FL 34689

I hereby 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: MICHAEL TROCHE      MGR      04/14/2010

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