


**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jan 16, 2008 08:00 A
Secretary of State

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| DOCUMENT # L05000054786 1. Entity Name D.E.R., L.L.C. |  |
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| Principal Place of Business 2669 DAVIS BLVD. UNIT 1 NAPLES, FL 34104 US | Mailing Address 380 21ST STREET SW NAPLES, FL 34117 US |
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01092008 No Chg-LLC

CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

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| 4. FEI Number 20-2940559 | Applied For Not Applicable |
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| 5. Certificate of Status Desired <input type="checkbox"/> | \$5.00 Additional Fee Required |
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| 6. Name and Address of Current Registered Agent RICHARDSON, DOLORES E 2669 DAVIS BLVD. UNIT 1 NAPLES, FL 34104 |
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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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

| 9. MANAGING MEMBERS/MANAGERS | |
|--|---|
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | MGRM RICHARDSON, DOLORES E 380 21ST STREET S.W. NAPLES, FL 34117 |
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| <p>U00000786439 01/17/08-80039-023 138.75</p> <p>DO NOT WRITE IN THIS SPACE</p> |
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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: Dolores Richardson DOLORES RICHARDSON 1/10/08
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #