

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000082793

Entity Name: DEVOBIS, LLC

FILED
Jul 12, 2008
Secretary of State

Current Principal Place of Business:

8807 MISTY CREEK DRIVE
SARASOTA, FL 34241

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 3319
SARASOTA, FL 34230

New Mailing Address:

8807 MISTY CREEK DRIVE
SARASOTA, FL 34241

FEI Number: 20-6759083 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

BISMUTH, BERNARD
8807 MISTY CREEK DRIVE
SARASOTA, FL 34241 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 () Delete
Name: BISMUTH, BERNARD E TRUSTEE
Address: P.O. BOX 3319
City-St-Zip: SARASOTA, FL 34230

Title: MGR () Delete
Name: DEVOS, MIREILLE G TRUSTEE
Address: P.O. BOX 3319
City-St-Zip: SARASOTA, FL 34230

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: BISMUTH, BERNARD E TRUSTEE
Address: 8807 MISTY CREEK DRIVE
City-St-Zip: SARASOTA, FL 34241

Title: MGR (X) Change () Addition
Name: DEVOS, MIREILLE G TRUSTEE
Address: 8807 MISTY CREEK DRIVE
City-St-Zip: SARASOTA, FL 34241

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: BERNARD BISMUTH

M

07/12/2008

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