

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000085712

FILED  
Mar 30, 2006  
Secretary of State

Entity Name: DTMPN, LLC

## Current Principal Place of Business:

4034 BOND CIRCLE  
NICEVILLE, FL 32578

## New Principal Place of Business:

732 E. MACK BAYOU RD  
UNIT 6  
SANTA ROSA BEACH, FL 32459

## Current Mailing Address:

PO BOX 780  
SHALIMAR, FL 32579

## New Mailing Address:

P.O. BOX 101627  
PITTSBURGH, PA 15237

FEI Number: 20-3388948

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

TESAR, DAVID  
4034 BOND CIRCLE  
NICEVILLE, FL 32578 US

## Name and Address of New Registered Agent:

BUCKNER, JAMES  
6119 VILLAGE OAKS DRIVE  
PENSACOLA, FL 32504 US

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: JAMES BUCKNER

03/30/2006

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete  
Name: TESAR, DAVID  
Address: 4034 BOND CIRCLE  
City-St-Zip: NICEVILLE, FL 32578

Title: MGRM ( ) Delete  
Name: NEILL, MICHAEL  
Address: 718 ORVILLE AVENUE  
City-St-Zip: CUYAHOGA FALLS, OH 44221

Title: MGRM ( ) Delete  
Name: NEILL, PATRICIA  
Address: 718 ORVILLE AVENUE  
City-St-Zip: CUYAHOGA FALLS, OH 44221

## ADDITIONS/CHANGES:

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

Title: M (X) Change ( ) Addition  
Name: NEILL, MICHAEL  
Address: 718 ORVILLE AVENUE  
City-St-Zip: CUYAHOGA FALLS, OH 44221

Title: M (X) Change ( ) Addition  
Name: NEILL, PATRICIA  
Address: 718 ORVILLE AVENUE  
City-St-Zip: CUYAHOGA FALLS, OH 44221

I hereby certify that the information supplied with this filing does not qualify for the 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: DAVID W. TESAR

MGRM

03/30/2006

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