

# 2007 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L05000086515

FILED  
Jul 23, 2007  
Secretary of State

Entity Name: DIPENTA ENTERPRISES, LLC

**Current Principal Place of Business:**

4940 LAGUNA VISTA DRIVE  
MELBOURNE, FL 32934

**New Principal Place of Business:**

**Current Mailing Address:**

4940 LAGUNA VISTA DRIVE  
MELBOURNE, FL 32934

**New Mailing Address:**

FEI Number: 20-3395008

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

DIPENTA, ROBERT M  
4940 LAGUNA VISTA DRIVE  
MELBOURNE, FL 32934 US

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

DIPENTA, ROBERT N  
4940 LAGUNA VISTA DRIVE  
MELBOURNE, FL 32934 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: ROBERT N. DIPENTA

07/23/2007

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: DIPENTA, ROBERT M  
Address: 4940 LAGUNA DRIVE  
City-St-Zip: MELBOURNE, FL 32934

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: DIPENTA, ROBERT N  
Address: 4940 LAGUNA DRIVE  
City-St-Zip: MELBOURNE, FL 32934

Title: MGR ( ) Change (X) Addition  
Name: DIPENTA, ROBERT M  
Address: 4940 LAGUNA DRIVE  
City-St-Zip: MELBOURNE, FL 32934

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: ROBERT N. DIPENTA

MGRM

07/23/2007

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