2006 LIMITED LIABILITY COMPANY

Jun 06, 2006 8:00 am Secretary of State **ANNUAL REPORT DOCUMENT # L05000092748** 04-28-2006 90031 004 ****50.00 1. Entity Name DPM CHEYENNE PROPERTIES, LLC Mailing Address Principal Place of Business 30009727 1661 CHEYENNE TRAIL 1661 CHEYENNE TRAIL MAITLAND, FL 32751 MAITLAND, FL 32751 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt, #, etc. 04252006 Chg-LLC CR2E083 (11/05) City & State City & State 4. FEI Number Applied For 3621603 Not Applicable Country . Zio Ziα Country \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent GRAY, N. DWAYNE JR.,ESQ C/O GREENSPOON MARDER, P.A. Street Address (P.O. Box Number is Not Acceptable) 201 EAST PINE STREET, SUITE 500 ORLANDO, FL 32801 City Zip Coda 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. Make check payable to Filing Fee is \$50.00 Due by May 1, 2006 Florida Department of State MANAGING MEMBERS/MANAGERS ADDITIONS/CHANGES MGR TITLE ☐ Delete TITLE ☐ Change Addition GRAY, N. DWAYNE JR. NAME STREET ADDRESS 1661 CHEYENNE TRAIL STREET ADDRESS CITY-ST-7IP MAITLAND, FL 32751 CITY, ST. 21P ☐ Delete Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Addition TITLE ☐ Change NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7P Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 11. I hereby certify that the information supplied with this fling 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 ampowered to execute this report as required by Chapter 608, Florida Statutes.

MAVA642

SIGNATURE:

FILED



ATTACHMENT JREENSPOON f MARDER

ASSOCIATION

From the Desk of:

Linda M. Phillips, Paralegal Capital Plaza I, Suite 500 201 East Pine Street Orlando, Florida 32801 407-425-6559 (Office) 407-422-6583 (Fax) linda.phillips@ greenspoonmarder.com

June 2, 2006

Division of Corporations Post Office Box 6478 Tallahassee, Florida 32314

> Re: DPM Cheyenne Properties, LLC

Sir/Madam:

Enclosed herein please find the corrected Annual Report form for the above-referenced entity. I have inserted the EIN number in the appropriate box as indicated in your correspondence to us.

Should you have any questions regarding the enclosures, please do not hesitate to contact our offices.

Very truly yours,

GREENSPOON MARDER, P.A.

Linda M. Phillips, Paralegal

For the Firm /lmp

encl: as stated

www.greenspoonmarder.com

Locations Throughout Florida

St. Petersburg