## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Feb 08, 2007 08:00 A Secretary of State

ANNOAL REPORT				0 /	
DOCUMENT # L05000097914  1. Entity Name DANA INVESTMENT, LLC				Secretary of S	
8219 ALDER	e of Business RMAN ROAD LE, FL 32211 US	Mailing Address 8219 ALDERMAN ROAD JACKSONVILLE, FL 32211	US	T KONINEN DIN BEKAK KININ BONIN BONIN BONIN BO	HIN JOHN KUNDU TANDA HAJU NIYANA NI INDI
C		TE IN THIS SPA	CE	4. FEI Number 20-3571056	CR2E083 (11/05)  Applied For Not Applicable  \$5.00 Additional Fee Required
6. Name and Address of Current Registered Agent  DANA, NOEL  8219 ALDERMAN ROAD  JACKSONVILLE, FL 32211			DO NOT WRITE IN THIS SPACE		
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 obligationer of polistered agent.  SIGNATURE  Shature typed or builted name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)  DATE  Filling Fee Is \$50.00  Due by May 1, 2007					
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	MANAGING MI MGR DANA, NOEL 8219 ALDERMAN ROAD JACKSONVILLE, FL 32211	MBERS/MANAGERS		U000006 02/15/07-8	27722 0072-013 50.00
CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS				DO NOT WR	
CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP					

11. I hereby certify that the information supplied with this filips 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 faceiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

<u>/- 18-07</u>

Daytime Phone #