

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000108413

Entity Name: DILLICHIP ENTERPRISES

FILED  
Jan 18, 2012  
Secretary of State

**Current Principal Place of Business:**

1760 JAMES CIRCLE  
TITUSVILLE, FL 32780

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 2186  
TITUSVILLE, FL 32781

**New Mailing Address:**

FEI Number: 20-3757698

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

WARDLE, DAVID J  
1760 JAMES CIRCLE  
TITUSVILLE, FL 32780 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: MR  
Name: EDMUNDSON, JAMES JR.,  
Address: 2861 NOBILITY AVE  
City-St-Zip: MELBOURNE, FL 32934

Title: MR  
Name: WARDLE, DAVID J  
Address: P.O BOX 2186  
City-St-Zip: TITUSVILLE, FL 32781

Title: MR  
Name: WARDLE, DAVID J  
Address: P.O BOX 2186  
City-St-Zip: TITUSVILLE, FL 32781

Title: MR  
Name: WARDLE, DAVID J  
Address: PO BOX 2186  
City-St-Zip: TITUSVILLE, FL 32781

Title: MR  
Name: WARDLE, DAVID J  
Address: PO BOX 2186  
City-St-Zip: TITUSVILLE, FL 32781

Title: MR  
Name: WARDLE, DAVID J  
Address: PO BOX 2186  
City-St-Zip: TITUSVILLE, FL 32781

I hereby 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 J WARDLE

MR.

01/18/2012

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