

**008 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Mar 07, 2008 08:00 A**  
**Secretary of State**

**DOCUMENT # L05000111715**

1. Entity Name  
**D MAN MANUFACTURING, LLC**



Principal Place of Business  
**2824 BAYSHORE GARDENS PARKWAY  
BRADENTON, FL 34207**

Mailing Address  
**2824 BAYSHORE GARDENS PARKWAY  
BRADENTON, FL 34207**



01212008No Chg-LLC

CR2E083 (12/07)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**20-3764741**

Applied For

Not Applicable

5. Certificate of Status Desired ☐ **\$5.00** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

**ROBERTS, DON E  
3212 SOUTH GATE CIRCLE  
SARASOTA, FL 34239-5514**

**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 obligations of registered agent.

SIGNATURE \_\_\_\_\_

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$138.75**  
**After May 1, 2008 Fee will be \$538.75**

U000000851168  
03/25/08-80027-025 138.75

**9. MANAGING MEMBERS/MANAGERS**

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP  
**MM  
HEINZMAN, DARWIN  
2824 BAYSHORE GARDENS PKWY  
BRADENTON, FL 34207**

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

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IN THIS SPACE**

11. I hereby certify that the information supplied with this filing 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 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

Date

Daytime Phone #

**Darwin Heinzman** **3/4/08** **941-735-8582**