

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000000682

FILED  
May 05, 2008  
Secretary of State

Entity Name: DMI GROUP, LLC

**Current Principal Place of Business:**

8263 BLAIE CT  
SARASOTA, FL 34240

**New Principal Place of Business:**

**Current Mailing Address:**

8263 BLAIE CT  
SARASOTA, FL 34240

**New Mailing Address:**

FEI Number: 20-4000711      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

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

THOMSEN, DAVID J  
8263 BLAIE CT  
SARASOTA, FL 34240      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:

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR      ( ) Delete  
Name: THOMSEN, DAVID J  
Address: 8263 BLAIE CT  
City-St-Zip: SARASOTA, FL 34240

Title: MGR      ( ) Delete  
Name: THOMSEN, MICHELLE C  
Address: 8263 BLAIE CT  
City-St-Zip: SARASOTA, FL 34240

**ADDITIONS/CHANGES:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: DAVID THOMSEN

MGRM

05/05/2008

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