

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000006858

FILED  
Jun 08, 2007  
Secretary of State

Entity Name: D M STEVENS ENTERPRISES LLC

**Current Principal Place of Business:**

2090 S NOVA RD  
STE AA05  
SOUTH DAYTONA, FL 32119 US

**New Principal Place of Business:**

**Current Mailing Address:**

2090 S NOVA RD  
STE AA05  
SOUTH DAYTONA, FL 32119 US

**New Mailing Address:**

FEI Number: 20-4153251      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)  
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:**

FRAZER, ROBERT D  
2090 S NOVA RD  
STE AA05  
SOUTH DAYTONA, FL 32119 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: MGR ( ) Delete  
Name: STEVENS, DAYLE M  
Address: 1075 BECKMAN DR  
City-St-Zip: SOUTH DAYTONA, FL 32119

Title: MGRM ( ) Delete  
Name: STEVENS, DAYLE V  
Address: 5212 TAYLOR AVE  
City-St-Zip: PORT ORANGE, FL 32127

Title: MGRM ( ) Delete  
Name: STEVENS, SHERYL  
Address: 1075 BECKMAN DR  
City-St-Zip: SOUTH DAYTONA, FL 32119

Title: MGRM ( ) Delete  
Name: STEVENS, JOYCE N  
Address: 5212 TAYLOR AVE  
City-St-Zip: PORT ORANGE, FL 32127

**ADDITIONS/CHANGES:**

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

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

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: DAYLE M STEVENS

MGR

06/08/2007

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