

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000021552

FILED
May 02, 2007
Secretary of State

Entity Name: DSM PROPERTY DEVELOPMENT LLC

Current Principal Place of Business:

370 W. DEARBORN ST.
SUITE A
ENGLEWOOD, FL 34223

New Principal Place of Business:

Current Mailing Address:

370 W. DEARBORN ST.
SUITE A
ENGLEWOOD, FL 34223

New Mailing Address:

FEI Number: 20-4622502 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:

BROWN, MICHAEL D
2561 ALESIO AVE.
NORTH PORT, FL 34223 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: MGRM () Delete
Name: BROWN, DENNIS
Address: 47 W. MAIN ST.
City-St-Zip: ATTICA, NY 14011

Title: MGRM () Delete
Name: BROWN, SEAN
Address: 5090 CENTRAL SARASOTA PKWY #109
City-St-Zip: SARASOTA, FL 34223

Title: MGRM () Delete
Name: BROWN, MICHAEL
Address: 2561 ALESIO AVE.
City-St-Zip: NORTH PORT, FL 34286

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:

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: MICHAEL BROWN

MGRM

05/02/2007

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