

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000069300

Entity Name: DEV COM, LLC

FILED
Jun 29, 2008
Secretary of State

Current Principal Place of Business:

11463 MALLORY SQUARE DR.
TAMPA, FL 33635

New Principal Place of Business:

11102 BLOOMINGTON DRIVE
TAMPA, FL 33635

Current Mailing Address:

11463 MALLORY SQUARE DR.
TAMPA, FL 33635

New Mailing Address:

11102 BLOOMINGTON DRIVE
TAMPA, FL 33635

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) 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:

ANDREWS, ERROL
11463 MALLORY SQUARE DR.
TAMPA, FL 33635 US

Name and Address of New Registered Agent:

ANDREWS, ERROL
11102 BLOOMINGTON DRIVE
TAMPA, FL 33635 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: _____

06/29/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: ANDREWS, ERROL
Address: 11463 MALLORY SQUARE DR.
City-St-Zip: TAMPA, FL 33635

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: ANDREWS, ERROL
Address: 11102 BLOOMINGTON DRIVE
City-St-Zip: TAMPA, FL 33635

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: ERROL ANDREWS

MGRM

06/29/2008

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