

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000088866

Entity Name: THREE TWENTY DUNBAR, LLC

FILED
Apr 22, 2009
Secretary of State

Current Principal Place of Business:

C/O THE CURY GROUP
5801 SOUTH DIXIE HWY., SUITE B
WEST PALM BEACH, FL 33405

New Principal Place of Business:

603 MAIN STREET
WINDERMERE, FL 34786

Current Mailing Address:

C/O THE CURY GROUP
5801 SOUTH DIXIE HWY., SUITE B
WEST PALM BEACH, FL 33405

New Mailing Address:

P.O. BOX 1100
WINDERMERE, FL 34786

FEI Number: 20-5588857

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CURY, EDWARD C
5801 SOUTH DIXIE HWY., SUITE B
WEST PALM BEACH, FL 33405 US

Name and Address of New Registered Agent:

BARKMAN, KEVIN
603 MAIN STREET
WINDERMERE, FL 34786 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: KEVIN BARKMAN

04/22/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: CURY, EDWARD C
Address: 5801 SOUTH DIXIE HWY., SUITE B
City-St-Zip: WEST PALM BEACH, FL 33405

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

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

Title: MGR () Change (X) Addition
Name: DIZNEY, DONALD R
Address: 603 MAIN STREET
City-St-Zip: WINDERMERE, FL 34786

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: DONALD R. DIZNEY

MGR

04/22/2009

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