

**2009 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L06000099032

**FILED**  
**Jul 30, 2009**  
**Secretary of State****Entity Name:** DREAMHIVE, LLC**Current Principal Place of Business:**1803 SHADY HILL TERRACE  
WINTER PARK, FL 32792 US**New Principal Place of Business:**631 LAUREL OAK LANE #217  
ALTAMONTE SPRINGS, FL 32701 US**Current Mailing Address:**1803 SHADY HILL TERRACE  
WINTER PARK, FL 32792 US**New Mailing Address:**631 LAUREL OAK LANE #217  
ALTAMONTE SPRINGS, FL 32701 US**FEI Number:** 20-5715397**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**GRANDMONT, WESLEY H III  
1803 SHADY HILL TERRACE  
WINTER PARK, FL 32792 US**Name and Address of New Registered Agent:**ANGUS, THOMAS J  
631 LAUREL OAK LANE #217  
ALTAMONTE SPRINGS, FL 32701 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: THOMAS J ANGUS

07/30/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:****Title:** MGRM ( ) Delete  
**Name:** GRANDMONT, WESLEY H III  
**Address:** 1803 SHADY HILL TERRACE  
**City-St-Zip:** WINTER PARK, FL 32792 US**Title:** MGRM ( ) Delete  
**Name:** ANGUS, THOMAS H III  
**Address:** 631 LAUREL OAK LANE #217  
**City-St-Zip:** ALTAMONTE SPRINGS, FL 32701 US**Title:** MGRM (X) Delete  
**Name:** HARPER, WILLIAM P  
**Address:** 1733 CHERRY RIDGE DRIVE  
**City-St-Zip:** LAKE MARY, FL 32746 US**ADDITIONS/CHANGES:****Title:** MGRM (X) Change ( ) Addition  
**Name:** ANGUS, THOMAS J  
**Address:** 631 LAUREL OAK LANE #217  
**City-St-Zip:** ALTAMONTE SPRINGS, FL 32701 US**Title:** MGRM (X) Change ( ) Addition  
**Name:** HARPER, WILLIAM P  
**Address:** 1733 CHERRY RIDGE DRIVE  
**City-St-Zip:** LAKE MARY, FL 32746 US**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: THOMAS J ANGUS

MGRM

07/30/2009

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