2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000115177

Entity Name: DUPONT FUNDING PARTNERS LLC

FILED Mar 25, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

28050 US HWY 19 NORTH

SUITE 400

CLEARWATER, FL 33761 US

New Mailing Address: Current Mailing Address:

28050 US HWY 19 NORTH SUITE 400

CLEARWATER, FL 33761 US

FEI Number: 20-5966008 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

KOUTSOUBOS, JAMES DUPONT ALLIANCE LLC 28050 US HWY 19 NORTH 28050 US HWY 19 NORTH SUITE 400 SUITE 400

CLEARWATER, FL 33761 US CLEARWATER, FL 33761 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: DUPONT ALLIANCE 03/25/2009

> Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGR () Delete (X) Change () Addition CONDO, JOHN CONDO, JOHN Name: Name:

28050 US HWY 19 NORTH, STE 400 Address: 28050 US HWY 19 NORTH, STE 400 Address:

City-St-Zip: CLEARWATER, FL 33761 City-St-Zip: CLEARWATER, FL 33761 US

Title: MGR () Delete Title: (X) Change () Addition KOUTSOUBOS, IOANNIS Name: KOUTSOUBOS, IOANNIS DR Name: Address: 28050 US HWY 19 NORTH, STE 400 Address: 28050 US HWY 19 NORTH, STE 400 City-St-Zip: CLEARWATER, FL 33761 City-St-Zip: CLEARWATER, FL 33761 GR

Title: MGR () Delete Title: MGR (X) Change () Addition

KOUTSOUBOS, GIA KOUTSOUBOS, GIA Name: Name:

28050 US HWY 19 NORTH, STE 400 28050 US HWY 19 NORTH, STE 400 Address: Address:

City-St-Zip: CLEARWATER, FL 33761 City-St-Zip: CLEARWATER, FL 33761 US

Title: MGRM () Delete Title: MGRM (X) Change () Addition Name: GEORGIADIS, DR. ERIC Name: GEORGIADIS, EVRIPIDIS DR 28050 US HWY 19 NORTH, STE 400 28050 US HWY 19 NORTH, STE 400 Address: Address:

City-St-Zip: CLEARWATER, FL 33761 City-St-Zip: CLEARWATER, FL 33761

Title: MGRM () Delete Title: (X) Change () Addition

EMANDI, DR. RAO AVIS, RICHARD JD Name: Name:

28050 US HWY 19 NORTH, STE 400 28050 US HWY 19 NORTH, STE 400 Address: Address: CLEARWATER, FL 33761 US City-St-Zip: CLEARWATER, FL 33761 City-St-Zip:

Title: () Delete Title: (X) Change () Addition VERDI, JOSEPH TZANAVARAS, KOSTANTINOS JD Name: Name: 28050 US HWY 19 NORTH, STE 400 28050 US HWY 19 NORTH, STE 400

Address: Address: CLEARWATER, FL 33761 GR CLEARWATER, FL 33761 City-St-Zip: 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: JOHN CONDO 03/25/2009