

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000010426

Entity Name: ALEDAVDAN, LLC.

**FILED**  
**Apr 29, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

16206 A FLIGHT PATH DRIVE  
BROOKSVILLE, FL 34602 US

**New Principal Place of Business:**

**Current Mailing Address:**

16206 A FLIGHT PATH DRIVE  
BROOKSVILLE, FL 34602 US

**New Mailing Address:**

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired ( )

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

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

WHIGHAM, DAVID L ESQ  
220 EAST MADISON STREET  
1140  
TAMPA, FL 33602 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  
Name: AMBROSE, DAVID D JR.  
Address: 16206 A FLIGHT PATH DRIVE  
City-St-Zip: BROOKSVILLE, FL 34604 US

Title: MGRM  
Name: AMBROSE, AMANDA  
Address: 16206 A FLIGHT PATH DRIVE  
City-St-Zip: BROOKSVILLE, FL 34604 US

I hereby 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: DAVID AMBROSE

MGRM

04/29/2011

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