2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000012076

Entity Name: DELORENZO HOUSE, L.L.C.

Current Principal Place of Business:	**New Principal Place of Business:**
690 OSCEOLA AVENUE, APT. 505 WINTER PARK, FL 32789	690 OSCEOLA AVENUE #309 WINTER PARK, FL 32789

Current Mailing Address:	**New Mailing Address:**
690 OSCEOLA AVENUE, APT. 505 WINTER PARK, FL 32789	690 OSCEOLA AVENUE #309 WINTER PARK, FL 32789

FEI Number: 20-8396911   FEI Number Applied For ( )   FEI Number Not Applicable ( )   Certificate of Status Desired ( )

Name and Address of Current Registered Agent:	**Name and Address of New Registered Agent:**
HENRY RUMPEL, JOHN 690 OSCEOLA AVENUE, APT. 309 WINTER PARK, FL 32789 US	RUMPEL, JOHN H 690 OSCEOLA AVENUE, APT. 309 WINTER PARK, FL 32789 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: JOHN H. RUMPEL   02/25/2008

Electronic Signature of Registered Agent   Date

MANAGING MEMBERS/MANAGERS: **ADDITIONS/CHANGES:**

Title:	MGRM ( ) Delete	Title:	( ) Change ( ) Addition
Name:	PATERSON, JOYA	Name:	
Address:	690 OSCEOLA AVENUE, APT. 505	Address:	
City-St-Zip:	WINTER PARK, FL 32789	City-St-Zip:	

Title:	MGRM ( ) Delete	Title:	MGRM (X) Change ( ) Addition
Name:	HENRY RUMPEL, JOHN	Name:	RUMPEL, JOHN H
Address:	690 OSCEOLA AVENUE, APT. 309	Address:	690 OSCEOLA AVENUE, APT. 309
City-St-Zip:	WINTER PARK, FL 32789	City-St-Zip:	WINTER PARK, FL 32789

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 H. RUMPEL   MGRM   02/25/2008

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