

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000050198

FILED
Apr 30, 2012
Secretary of State

Entity Name: DUPREES LLC

Current Principal Place of Business:

2298 SW PICTURE TERRACE
PORT ST LUCIE, FL 34953

New Principal Place of Business:

Current Mailing Address:

2298 SW PICTURE TERRACE
PORT ST LUCIE, FL 34953

New Mailing Address:

FEI Number: 06-1817409

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DUPREE, STRATHER II
2298 SW PICTURE TERRACE
PORT ST LUCIE, FL 34953 US

Name and Address of New Registered Agent:

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: DUPREE, STRATHER II
Address: 2298 SW PICTURE TERRACE
City-St-Zip: PORT ST LUCIE, FL 34953

Title: MGRM
Name: PITTMAN, DELON A
Address: 2308 NICOL CIRCLE
City-St-Zip: MITCHELLVILLE, MD 20721

Title: MGRM
Name: SMITH, SHELIA M
Address: 21811 CROSSGLEN CT
City-St-Zip: SPRING, TX 77373

Title: MGRM
Name: DUPREE, ALESHIA
Address: 517 E ROYAL ST
City-St-Zip: FLORENCE, SC 29503

Title: MGRM
Name: JOHNSON, BETTYE
Address: 311 KING DAVID DRIVE
City-St-Zip: FLORENCE, SC 29501

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: STRATHER DUPREE

MGM

04/30/2012

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