## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L07000053189

Entity Name: DUPONT ALLIANCE PROPERTIES LLC

FILED Mar 25, 2009 Secretary of State

Current Principal Place of Business:			Ne	New Principal Place of Business:				
	HWY 19 NORT	H						
STE 400 CLEARWA	TER, FL 3376	1						
Current Mailing Address:			Ne	New Mailing Address:				
28050 US HWY 19 NORTH								
STE 400 CLEARWA	TER, FL 3376	1						
FEI Number:		FEI Number Applied For ( )	FEI Number	r Not Appl	icable ( )	Certificate of Status Desired (X)		
		urrent Registered Agent:			, ,	New Registered Agent:		
		urrent Registered Agent.	No	ille allu	Auuress or	New Registered Agent.		
28050 US I STE 400	ALLIANCE LLC HWY 19 NORT							
	TER, FL 3376							
The above in the State		ubmits this statement for the p	urpose of ch	nanging i	ts registered	l office or registered agent, or both		
SIGNATUR	RE:							
	Electroni	c Signature of Registered Age	ent			Date		
MANAGING MEMBERS/MANAGERS:			AD	ADDITIONS/CHANGES:				
Title:	, ,	Delete	Titl			( ) Change ( ) Addition		
Name: Address:	CONDO, JOHN 28050 US HWY	19 NORTH, # 400		me: dress:				
City-St-Zip:	CLEARWATER,			y-St-Zip:				
Title:		Delete	Titl			( ) Change ( ) Addition		
Name: Address:	GEORGIADIS, E 28050 US HWY	VRIPIDIS 19 NORTH, #400		me: dress:				
City-St-Zip:	CLEARWATER,			y-St-Zip:				
Title:	MGR ()	Delete	Titl	e:	MGR	(X) Change ( ) Addition		
Name:	VERDI, JOSEPH 28050 US HWY			me:	MARINO, DA	VID VY 19 NORTH #400		
Address: City-St-Zip:	CLEARWATER,			dress: y-St-Zip:		ER, FL 33761 UK		
Title:	MGR ()	Delete	Titl	e:	MGR	(X) Change ( ) Addition		
Name:	KOUTSOUBOS,			me:		DS, IOANNIS DR		
Address: City-St-Zip:	28050 US HWY CLEARWATER,	19 NORTH, #400 FL 33761		dress: y-St-Zip:		WY 19 NORTH, #400 ER, FL 33761 GR		
Title:	MGRM ()	Delete	Titl		MGR	(X) Change()Addition		
Name:	DUPONT ALLIAN			me:	AVIS, RICHA	· · · · · · · · · · · · · · · · · · ·		
Address:	28050 US HWY	19 NORTH, #400		dress:		VY 19 NORTH, #400		
City-St-Zip:	CLEARWATER,	FL 33761	Cit	y-St-Zip:	CLEARWATE	ER, FL 33761 US		
Title:	( )	Delete	Titl			( ) Change (X) Addition		
Name:				me:		S, KOSTANTINOS DR		
Address: Citv-St-Zip:				dress: v-St-Zip:		VY 19 NORTH, #400 ER. FL 33761 GR		

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 CEO 03/25/2009