

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000053683

FILED
Mar 12, 2008
Secretary of State

Entity Name: DOLAN ENTERPRISES, LLC

Current Principal Place of Business:

150 E. BLOOMINGDALE AVE., SUITE 126
BRANDON, FL 33511

New Principal Place of Business:

1403 PEACHFIELD DRIVE
VALRICO, FL 33596

Current Mailing Address:

150 E. BLOOMINGDALE AVE., SUITE 126
BRANDON, FL 33511

New Mailing Address:

1403 PEACHFIELD DRIVE
VALRICO, FL 33596

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LASMAN, JEFFREY M ESQ.
C/O LASMAN LAW FIRM, P.A.
6152 DELANCEY STATION STREET, SUITE 205
RIVERVIEW, FL 33569 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 () Delete
Name: DOLAN, DON W
Address: 150 E. BLOOMINGDALE AVE., SUITE 126
City-St-Zip: BRANDON, FL 33511

Title: MGRM () Delete
Name: DOLAN, VERA C
Address: 150 E. BLOOMINGDALE AVE., SUITE 126
City-St-Zip: BRANDON, FL 33511

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: DOLAN, DON W
Address: 1403 PEACHFIELD DRIVE
City-St-Zip: VALRICO, FL 33596

Title: MGRM (X) Change () Addition
Name: DOLAN, VERA C
Address: 1403 PEACHFIELD DRIVE
City-St-Zip: VALRICO, FL 33596

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: JEFFREY M. LASMAN

RA

03/12/2008

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