## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L07000054631

Entity Name: DF/MS GAFFNEY, LLC

FILED Jan 19, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 3443 HANCOCK BRIDGE PARKWAY NORTH FORT MYERS, FL 33903 **New Mailing Address: Current Mailing Address:** 3443 HANCOCK BRIDGE PARKWAY NORTH FORT MYERS, FL 33903 US FEI Number: 26-0223776 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: FULLENKAMP, DENNIS J 3443 HANCOĆK BRIDGE PARKWAY NORTH FORT MYERS, FL 33903 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:

tle: MGRM () Delete

Name: FULLENKAMP, DENNIS J

Address: 3443 HANCOCK BRIDGE PARKWAY # 301
City-St-Zip: NORTH FORT MYERS, FL 33903 US

Title: MGRM ( ) Delete
Name: STRAYHORN, MICHAEL M

Address: 3443 HANCOCK BRIDGE PARKWAY #301
City-St-Zip: NORTH FORT MYERS, FL 33903 US

## ADDITIONS/CHANGES:

Name:

Name:

Address:

City-St-Zip:

Address:

City-St-Zip:

Title: ( ) Change ( ) Addition

Title: ( ) Change ( ) Addition

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: DENNIS J. FULLENKAMP MGRM 01/19/2009