2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000058397

Entity Name: DREAMFINDERS LLC

FILED Mar 20, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

3237 EL CAMINO REAL

WEST PALM BEACH, FL 33409

Current Mailing Address: New Mailing Address:

3237 EL CAMINO REAL WEST PALM BEACH, FL 33409

FEI Number: 11-3813780 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:

GRADY, JAMES D GRADY, LINDA A

3237 EL CAMINO REAL 3237 EL CAMINO REAL

WEST PALM BEACH, FL 33409 US WEST PALM BEACH, FL 33409 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: LINDA A. GRADY 03/20/2009

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGR () Delete Title: () Change () Addition

 Name:
 GRADY, LINDA
 Name:

 Address:
 3237 EL CAMINO REAL
 Address:

 City-St-Zip:
 WEST PALM BEACH, FL 33409
 City-St-Zip:

Title: MGRM () Delete Title: () Change () Addition

 Name:
 GRADY, JAMES D
 Name:

 Address:
 3237 EL CAMINO REAL
 Address:

 City-St-Zip:
 WEST PALM BEACH, FL 33409
 City-St-Zip:

Title: MGRM () Delete Title: () Change () Addition

 Name:
 GRADY, CHAD
 Name:

 Address:
 4161 CHESTNUT AVENUE
 Address:

 City-St-Zip:
 PALM BEACH, FL 33410
 City-St-Zip:

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: LINDA A. GRADY MGRM 03/20/2009