

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000122336

Entity Name: DELLEM, LLC

**FILED**  
**Jan 05, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

14023 N. DALE MABRY HWY.  
TAMPA, FL 336182401

**New Principal Place of Business:**

**Current Mailing Address:**

16115 EAST COURSE DR  
TAMPA, FL 336241123 HI

**New Mailing Address:**

14023 N. DALE MABRY HWY.  
TAMPA, FL 336182401

FEI Number: 27-1242572

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

WEAVER, LARRY S  
16115 EAST COURSE DRIVE  
TAMPA, FL 336241123 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: WEAVER, LARRY S  
Address: 16115 EAST COURSE DRIVE  
City-St-Zip: TAMPA, FL 336241123

Title: MGR  
Name: WEAVER, SHARON C  
Address: 16115 EAST COURSE DRIVE  
City-St-Zip: TAMPA, FL 336241123

Title: MGR  
Name: WEAVER, LARRY S JR  
Address: 1050 NASHVILLE DR  
City-St-Zip: WESLEY CHAPEL, FL 33544

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: LARRY S WEAVER

MGRM

01/05/2011

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