

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jan 20, 2006 08:00 AM
Secretary of State

DOCUMENT # L97000000023

1. Entity Name

DAHLMAN PROFESSIONAL CENTER, L.C.



Principal Place of Business

14 SUNTREE PLACE, SUITE 101
MELBOURNE, FL 32940

Mailing Address

14 SUNTREE PLACE, SUITE 101
MELBOURNE, FL 32940



01132006No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number

59-3417008

Applied For

Not Applicable

5. Certificate of Status Desired



\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

KING, SHIRLEY
14 SUNTREE PLACE, SUITE 101
MELBOURNE, FL 32940

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$50.00
Due by May 1, 2006**

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	KING, SHIRLEY
STREET ADDRESS	14 SUNTREE PLACE, SUITE 101
CITY- ST- ZIP	MELBOURNE, FL 32940
TITLE	MGRM
NAME	DAHLMAN, DENNIS
STREET ADDRESS	14 SUNTREE PLACE, SUITE 101
CITY- ST- ZIP	MELBOURNE, FL 32940
TITLE	MGRM
NAME	BACCUS, SHIRLEY
STREET ADDRESS	14 SUNTREE PLACE, SUITE 101
CITY- ST- ZIP	MELBOURNE, FL 32940
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	

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01/25/06-80017-021 50.00

**DO NOT WRITE
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:

Shirley P. King

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #