

**2004 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Jun 14, 2004 08:00 AM**  
**Secretary of State**

**DOCUMENT # L99000000672**

1. Entity Name  
**DPC CLERMONT, L.C.**



Principal Place of Business  
**2601 DIAMOND CLUB DR  
CLERMONT, FL 34711**

Mailing Address  
**2601 DIAMOND CLUB DR  
CLERMONT, FL 34711**



06092004No Chg-LLC

CR2E083 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**59-3564603**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ **\$5.00** Additional  
Fee Required

**8. Name and Address of Current Registered Agent**

**GAGLIARDI, GREGG  
2601 DIAMOND CLUB DR  
CLERMONT, FL 34711**

**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 September 8, 2004**

**9. MANAGING MEMBERS/MANAGERS**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>MGR GAGLIARDI, GREGG 2601 DIAMOND CLUB DR CLERMONT, FL 34711</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>MGR STOTTELMYRE, TODD 2601 DIAMOND CLUB DR CLERMONT, FL 34711</b>
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000000162504  
06/14/04-80001-007 50.00

**DO NOT WRITE  
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:** \_\_\_\_\_

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

Date

Daytime Phone #

6-9-04

352-243-0411