

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M04000004085

Entity Name: DAYTONA SANDS, LLC

FILED  
Jan 16, 2007  
Secretary of State

**Current Principal Place of Business:**

822 MAIN STREET  
PO BOX 248  
WEST LAFAYETTE, IN 47902

**New Principal Place of Business:**

822 MAIN STREET  
WEST LAFAYETTE, IN 47902

**Current Mailing Address:**

822 MAIN STREET  
PO BOX 248  
WEST LAFAYETTE, IN 47902

**New Mailing Address:**

822 MAIN STREET  
WEST LAFAYETTE, IN 47902

FEI Number: 20-1549504

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

O'MALLEY, R. MICHAEL  
4021 ARROWWOOD CT.  
BONITA SPRINGS, FL 34134 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 ( ) Delete  
Name: O'MALLEY, M. SHANE  
Address: 822 MAIN STREET PO BOX 248  
City-St-Zip: WEST LAFAYETTE, IN 47902

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: O'MALLEY, M. SHANE  
Address: 822 MAIN STREET  
City-St-Zip: WEST LAFAYETTE, IN 47902

I hereby certify that the information supplied with this filing does not qualify for the 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: M. SHANE O'MALLEY

MGRM

01/16/2007

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