

# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000096094

**FILED**  
**Apr 26, 2011**  
**Secretary of State**

**Entity Name:** DOUBLE D ESTATES, LLC

**Current Principal Place of Business:**

356 LISETTE CT  
FT WALTON BEACH, FL 32547

**New Principal Place of Business:**

356 LISETTE CT  
FT WALTON BEACH, FL 32547 US

**Current Mailing Address:**

356 LISETTE CT  
FT WALTON BEACH, FL 32547

**New Mailing Address:**

356 LISETTE CT  
FT WALTON BEACH, FL 32547 US

**FEI Number:** 59-3821711

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ENGELBERGER, DARREN  
356 LISETTE CT  
FT WALTON BEACH, FL 32547 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: ENGELBERGER, DARREN  
Address: 356 LISETTE CT  
City-St-Zip: FT WALTON BEACH, FL 32547 US

Title: MGRM  
Name: DALY, JOHN  
Address: 212 W 700 S  
City-St-Zip: SALT LAKE CITY, UT 84101 US

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: DARREN ENGELBERGER

MGRM

04/26/2011

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