

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M05000002002

**FILED**  
**Apr 13, 2011**  
**Secretary of State**

**Entity Name:** DA REALTY MANAGEMENT, LLC

**Current Principal Place of Business:**

6C WEST TOWER CIRCLE  
UNIT 102  
ORMOND BEACH, FL 32174

**New Principal Place of Business:**

**Current Mailing Address:**

6C WEST TOWER CIRCLE  
UNIT 102  
ORMOND BEACH, FL 32174

**New Mailing Address:**

**FEI Number:** 20-2756904

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

TECCE, JOHN  
6C WEST TOWER CIRCLE  
UNIT 102  
ORMOND BEACH, FL 32174 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:** MOORE, JOHN  
**Address:** 30 ROCKEFELLER PLAZA, 50TH FLOOR  
**City-St-Zip:** NEW YORK, NY 10020

**Title:** MGRM  
**Name:** TECCE, JOHN  
**Address:** 6C WEST TOWER CIRCLE  
**City-St-Zip:** ORMOND BEACH, FL 32174

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:** JOHN TECCE

MGRM

04/13/2011

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