

**2008 LIMITED PARTNERSHIP ANNUAL REPORT**  
**Due By May 1, 2008**

**FILED**  
**Jan 24, 2008 08:00 AM**  
**Secretary of State**

**DOCUMENT # A06000001336**

1. Entity Name  
DA-DE, LLLP



Principal Place of Business  
201 5TH AVENUE DRIVE EAST  
BRADENTON, FL 34208

Mailing Address  
P.O. BOX 656  
BRADENTON, FL 34206



01212008 No Chg-LP

CR2E003 (12/06)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
20-5819418

Applied For  
Not Applicable

5. Certificate of Status Desired



**\$8.75** Additional  
Fee Required

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

HARRISON, THOMAS W  
1206 MANATEE AVENUE WEST  
BRADENTON, FL 34205

**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

DATE

**FILE NOW!!! FEE IS \$500.00**  
**After May 1, 2008, Fee will be \$900.00**

**A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.**  
**NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.**

**12. GENERAL PARTNER INFORMATION**

DOCUMENT #

NAME  
STREET ADDRESS  
CITY - ST - ZIP

DA-DE, LLC  
201 5TH AVENUE DRIVE EAST  
BRADENTON, FL 34208

DOCUMENT #

NAME  
STREET ADDRESS  
CITY - ST - ZIP

DOCUMENT #

NAME  
STREET ADDRESS  
CITY - ST - ZIP

DOCUMENT #

NAME  
STREET ADDRESS  
CITY - ST - ZIP

DOCUMENT #

NAME  
STREET ADDRESS  
CITY - ST - ZIP

DOCUMENT #

NAME  
STREET ADDRESS  
CITY - ST - ZIP

U000000796213  
01/29/08-80023-026 508.75

**DO NOT WRITE  
IN THIS SPACE**

STAPLE CHECK HERE

14. 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 General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

**SIGNATURE:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

1/21/08

Date

941-748-8080

Daytime Phone #