

# 2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000018644

FILED  
Jan 05, 2010  
Secretary of State

Entity Name: DOUBLE D, LLC

**Current Principal Place of Business:**

4355 SE HOPETOWN TERRACE  
STUART, FL 34997

**New Principal Place of Business:**

**Current Mailing Address:**

4355 SE HOPETOWN TERRACE  
STUART, FL 34997

**New Mailing Address:**

FEI Number: 36-4475217

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BARKER, DUANE C  
4355 SE HOPETOWN TERRACE  
STUART, FL 34997 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: DUANE & DIANE BARKER  
Address: 4355 SE HOPTOWN TERRACE, #3  
City-St-Zip: STUART, FL 34997

Title: MGRM  
Name: BARKER, STEVEN  
Address: W315 S7565 LAKECREST DRIVE  
City-St-Zip: MUKWONAGO, WI 53149

Title: MGRM  
Name: REIM, PATTI  
Address: 258 OLD MCDONOUGH ROAD  
City-St-Zip: MCDONOUGH, GA 30253

Title: MGRM  
Name: DRAEVING, JULIE  
Address: 1030 SOUTH 36TH STREET  
City-St-Zip: MILWAUKEE, WI 53215

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: DIANE BARKER

MGRM

01/05/2010

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