

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000025935

Entity Name: D.A.D. HOLDINGS, LLC

FILED
Mar 24, 2009
Secretary of State

Current Principal Place of Business:

C/O GUY SPERDUTO 8982 TAFT STREET
PEMBROKE PINES, FL 33024

New Principal Place of Business:

52 RILEY ROAD
198
CELEBRATION, FL 34747

Current Mailing Address:

C/O GUY SPERDUTO 8982 TAFT STREET
PEMBROKE PINES, FL 33024

New Mailing Address:

52 RILEY ROAD
198
CELEBRATION, FL 34747

FEI Number: 41-2082070

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SPERDUTO, GUY
8982 TAFT STREET
PEMBROKE PINES, FL 33024 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: LYONS, DAVID
Address: C/O GUY SPERDUTO 8982 TAFT STREET
City-St-Zip: PEMBROKE PINES, FL 33024

Title: MGRM () Delete
Name: SCHAAL, KENDRA
Address: 30128 CHANNEL WAY DRIVE
City-St-Zip: CANYON LAKE, CA 92587

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: LYONS, DAVID
Address: 52 RILEY ROAD #198
City-St-Zip: CELEBRATION, FL 34747

Title: MGRM (X) Change () Addition
Name: LYONS, KENDRA
Address: 52 RILEY ROAD #198
City-St-Zip: CELEBRATION, FL 34747

I hereby certify that the information supplied with this filing does not qualify 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: DAVID LYONS

MGRM

03/24/2009

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