2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 28, 2005
Secretary of State

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Entity Name: D&D PROPERTIES LLC

Current Principal Place of Business:

1906 KADIMA CIRCLE
FORT WALTON BEACH, FL 32547 US

New Principal Place of Business:

PO BOX 837
FORT WALTON BEACH, FL 32549 US

Current Mailing Address:

1906 KADIMA CIRCLE
FORT WALTON BEACH, FL 32547 US

New Mailing Address:

PO BOX 837
FORT WALTON BEACH, FL 32549 US

FEI Number: 27-0035128 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DEROSA, ANTHONY
1906 KADIMA CIRCLE
FORT WALTON BEACH, FL 32547 US

Name and Address of New Registered Agent:

DEROSA, ANTHONY
1910 KADIMA CIRCLE
FORT WALTON BEACH, FL 32547 US

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: ANTHONY DEROSA 02/28/2005
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MEMBERS:

Title: MGR ( ) Delete
Name: DEROSA, MORRIS
Address: 112 COBB HALL CT
City-St-Zip: GREENVILLE, SC 29607 US

Title: MGR ( ) Delete
Name: DEROSA, ANTHONY
Address: 1906 KADIMA CIRCLE
City-St-Zip: FORT WALTON BEACH, FL 32547 US

ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: MGR (X) Change ( ) Addition
Name: DEROSA, ANTHONY
Address: 1910 KADIMA CIRCLE
City-St-Zip: FORT WALTON BEACH, FL 32547 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ANTHONY DEROSA MGR 02/28/2005
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date