2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 18, 2005
Secretary of State

DOCUMENT# L02000032190

Entity Name: D & P TOWNSEND, LLC

Current Principal Place of Business:

402 FERN CLIFF AVENUE
TEMPLE TERRACE, FL 33617

New Principal Place of Business:

Current Mailing Address:

402 FERN CLIFF AVENUE
TEMPLE TERRACE, FL 33617

New Mailing Address:

FEI Number: 45-0491819 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

TOWNSEND, DAVID L
402 FERN CLIFF AVENUE
TEMPLE TERRACE, FL 33617 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/MEMBERS:

Title: MGRM ( ) Delete
Name: TOWNSEND, DAVID L
Address: 402 FERN CLIFF AVENUE
City-St-Zip: TEMPLE TERRACE, FL 33617

Title: MGRM ( ) Delete
Name: TOWNSEND, PAMELA S
Address: 402 FERN CLIFF AVENUE
City-St-Zip: TEMPLE TERRACE, FL 33617

ADDITIONS/CHANGES:

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

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

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: DAVID TOWNSEND DR 02/18/2005

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