2005 LIMITED LIABILITY COMPANY

DO NOT WRITE IN THIS SPACE

ANNUAL REPORT DOCUMENT # L03000013227

FILED Jan 18, 2005 08:00 AM **Secretary of State**

Principal Place of Business

Mailing Address

1100 NW 15 AVE.

1. Entity Name

POMPANO BEACH, FL 33069

DOUBLE D RANCH, LLC

1100 NW 15 AVE. POMPANO BEACH, FL 33069



01102005 No Chg-LLC

CR2E083 (10/03)

4. FEi Number 57-1162257

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

CORPDIRECT AGENTS, INC. 103 N. MERIDIAN ST. TALLAHASSEE, FL 32301

TITLE NAME STREET ADDRESS CITY-ST-ZIP

DO NOT WRITE IN THIS SPACE

	named entity submits this statement for the purpose of changing its register ions of registered agent.	ed office or registered agent, or both, in the State of Florida. I am familiar with, and accept
SIGNATURE.	Signature, typed or printed name of registered agen) and filte if applicable (NOTE, Registere	d Agent signature required when reinstating) DATE
Fi D	iling Fee is \$50.00 ue by May 1, 2005	U00000182288 01/19/05-80022-002 50.00
9.	MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY+ST-ZIP	MGR DOWNEY, DANIEL 1100 NW 15 AVE. POMPANO BEACH, FL 33069	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
Title Name Street address City-St-Zip		DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS OUTVISTING		

11. I hereby certify that the information supplied with this filing does not qualify 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 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 trusted empowered to execute this report as required by Chapter 608, Florida Statutes.

DANIEL SIGNATURE:

1.11.05

954-972-0026

Daytime Phone #