

**2005 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**

**Aug 26, 2005 08:00 AM  
Secretary of State**

**DOCUMENT # L03000026396**

1. Entity Name  
**WRAPPER D, LLC**



Principal Place of Business  
**3140 COVENTRY ST.  
DELTONA, FL 32738**

Mailing Address  
**3140 COVENTRY ST.  
DELTONA, FL 32738**



07202005No Chg-LLC

CR2E083 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**57-1179072**

Applied For  
Not Applicable

5. Certificate of Status Desired



**\$5.00** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

**PALMETTO CHARTER SERVICES, INC.  
150 MAGNOLIA AVE  
DAYTONA BEACH, FL 32114**

**DO NOT WRITE  
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

*Signature, typed or printed name of registered agent and title if applicable.*

*(NOTE: Registered Agent signature required when reinstating)*

DATE

**Filing Fee is \$50.00  
Due by September 7, 2005**

**9. MANAGING MEMBERS/MANAGERS**

TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR BRUCKART, DEBRA A 3140 COVENTRY ST. DELTONA, FL 32738
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08/26/05-80002-013 55.00

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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 trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE

*Debra A. Bruckart*