2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

CITY-ST-ZIP

SIGNATURE:

FILED Feb 15, 2006 08:00 AM **Secretary of State** DOCUMENT # L03000032814 1. Entity Name DDJ, LLC Principal Place of Business Mailing Address 955 ZACHARY LANE 955 ZACHARY LANE FORT WALTON BEACH, FL 32547 FORT WALTON BEACH, FL 32547 01202006 No Chg-LLC CR2E083 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 57-1186359 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Reguland 6. Name and Address of Current Registered Agent FLEET, H. BART DO NOT WRITE 1104 EGLIN PKWY. SHALIMAR, FL 32579 IN THIS SPACE 6. 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 little if applicable (NOTE Registered Aperil algorithms required when reinstating) DATE Filing Fee is \$50.00 Due by May 1, 2006 Ø. MANAGING MEMBERS/MANAGERS MGR TITLE NAME GREENUP, DONNA D TRUSTEE STREET ADDRESS 955 ZACHARY LANE FORT WALTON BEACH, FL 32547 CITY-ST-ZIP 1000000434457 NAME 02/25/06-80002-024 50.00 STREET ADDRESS C(TY-S1-Z(P 7ITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 3151.5 NAME STREET ADDRESS

11. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, 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.

Donne

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REFRESENTATIVE