

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Mar 06, 2006 08:00 AM
Secretary of State

DOCUMENT # L03000032953

Entity Name
DKD, LLC



Principal Place of Business
**11000 NW 11TH AVENUE
GAINESVILLE, FL 32606**

Mailing Address
**11000 NW 11TH AVENUE
GAINESVILLE, FL 32606**



03072006 No Chg-LLC

CRZE083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
11-3703798

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$5.00** Additional
Fee Required

6. Name and Address of Current Registered Agent

**TAYLOR, JAMES J JR.
160 MAGNOLIA AVENUE
KEYSTONE HEIGHTS, FL 32656**

**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 restateing)

DATE _____

**Filing Fee is \$50.00
Due by May 1, 2006**

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
**MGRM
LARSON, STEVEN P MGRM
11000 NW 11TH AVE
GAINESVILLE, FL 32606**

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
**MGRM
LOEFFLER, GARY W MGRM
6524 JAMES AVE SOUTH
RICHFIELD, MN 55423**

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE
NAME
STREET ADDRESS
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CITY- ST- ZIP

1100000455575
03/15/06-80083-017 50.00

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IN THIS SPACE**

11. I hereby certify that the information supplied with this filing 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.

SIGNATURE: _____

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

3/3/06 352-278-1459

2/2/10

Daytime Phone #