

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000044527

FILED
Jan 18, 2006
Secretary of State

Entity Name: DAVIS PROPERTIES, LLC

Current Principal Place of Business:

2881 E. VINA DEL MAR BLVD
ST PETE BEACH, FL 33706 US

New Principal Place of Business:

105 2ND AVENUE
ST PETE BEACH, FL 33706 US

Current Mailing Address:

2881 E. VINA DEL MAR BLVD
ST PETE BEACH, FL 33706 US

New Mailing Address:

3804 LOS CERROS PLACE
DAVIS, CA 95616 US

FEI Number: 20-0581986

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RILEY, STEVEN P ESQ.
4805 W. LAUREL STREET
230
TAMPA, FL 33607 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/MANAGERS:

Title: MGRM () Delete
Name: ROBINSON, DAVID L
Address: 2881 E. VINA DEL MAR BLVD
City-St-Zip: ST PETE BEACH, FL 33706 US

Title: MGRM () Delete
Name: ROBINSON, STACEY J
Address: 2881 E. VINA DEL MAR BLVD
City-St-Zip: ST PETE BEACH, FL 33706 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: ROBINSON, DAVID L
Address: 3804 LOS CERROS PLACE
City-St-Zip: DAVIS, CA 95616 US

Title: MGRM (X) Change () Addition
Name: ROBINSON, STACEY J
Address: 3804 LOS CERROS PLACE
City-St-Zip: DAVIS, CA 95616 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: STACEY ROBINSON

MGRM

01/18/2006

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