

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT (AR) - DUE BY MAY 1, 2008**

FILED
Jan 28, 2008 8:00 am
Secretary of State

01-28-2008 90074 029 ***138.75



DOCUMENT # L04000004638

1. Entity Name

D & J BUILDERS OF PALM BEACH COUNTY, LLC

Principal Place of Business

3529 PALOMINO DR.
LANTANA FL 33462

Mailing Address

3529 PALOMINO DR.
LANTANA FL 33462



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

1st MOORE CR2E083 (10/07)

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

05-0594824

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HARRIS, J. RICHARD
4400 P.G.A. BLVD
SUITE 800
PALM BEACH GARDENS FL 33410

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Sign and type or printed name of registered agent and state (last printed)

(NOTE: Registered Agent signature required when registering)

DATE

FILE NOW!!! FEE IS \$138.75
After May 1, 2008, Fee Will Be \$538.75
Make Check Payable to Florida Department of State

pd ✓ 2006
1/23/08

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

| 9. MANAGING MEMBERS/MANAGERS | 10. ADDITIONS/CHANGES |
|---|--|
| <p>TITLE: C <input type="checkbox"/> Delete</p> <p>NAME: MULDER, DOUGLAS J</p> <p>STREET ADDRESS: 3529 PALOMINO DR</p> <p>CITY-ST-ZIP: LANTANA FL 33462</p> | <p><input type="checkbox"/> Change <input type="checkbox"/> Addition</p> |
| <p>TITLE: <input type="checkbox"/> Delete</p> <p>NAME:</p> <p>STREET ADDRESS:</p> <p>CITY-ST-ZIP:</p> | <p><input type="checkbox"/> Change <input type="checkbox"/> Addition</p> |
| <p>TITLE: <input type="checkbox"/> Delete</p> <p>NAME:</p> <p>STREET ADDRESS:</p> <p>CITY-ST-ZIP:</p> | <p><input type="checkbox"/> Change <input type="checkbox"/> Addition</p> |
| <p>TITLE: <input type="checkbox"/> Delete</p> <p>NAME:</p> <p>STREET ADDRESS:</p> <p>CITY-ST-ZIP:</p> | <p><input type="checkbox"/> Change <input type="checkbox"/> Addition</p> |
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| <p>TITLE: <input type="checkbox"/> Delete</p> <p>NAME:</p> <p>STREET ADDRESS:</p> <p>CITY-ST-ZIP:</p> | <p><input type="checkbox"/> Change <input type="checkbox"/> Addition</p> |

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: *Douglas J. Mulder*

DOUGLAS J. MULDER (561)
1/23/08 9654689

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

Date

Signature Print Name