

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000026223

Entity Name: DIPASQUA PROPERTIES, LLC

FILED
Jan 16, 2008
Secretary of State

Current Principal Place of Business:

1311 LAHARA WAY
TRINITY, FL 346554650

New Principal Place of Business:

1609 EL PARDO DRIVE
TRINITY, FL 346557045

Current Mailing Address:

1311 LAHARA WAY
TRINITY, FL 346554650

New Mailing Address:

1609 EL PARDO DRIVE
TRINITY, FL 346557045

FEI Number: 16-1699840

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

DIPASQUA, JOSEPH A
1311 LAHARA WAY
TRINITY, FL 346554650 US

Name and Address of New Registered Agent:

DIPASQUA, JOSEPH A
1609 EL PARDO DRIVE
TRINITY, FL 346557045 US

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:

01/16/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: DIPASQUA, JOSEPH A
Address: 1311 LAHARA WAY
City-St-Zip: TRINITY, FL 346554650

Title: MGR () Delete
Name: DIPASQUA, JENNIFER
Address: 1311 LAHARA WAY
City-St-Zip: TRINITY, FL 346554650

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: DIPASQUA, JOSEPH A
Address: 1609 EL PARDO DRIVE
City-St-Zip: TRINITY, FL 346557045

Title: MGR (X) Change () Addition
Name: DIPASQUA, JENNIFER
Address: 1609 EL PARDO DRIVE
City-St-Zip: TRINITY, FL 346557045

I hereby certify that the information supplied with this filing does not qualify 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: JOSEPH A. DIPASQUA

MGR

01/16/2008

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