

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 28, 2006 08:00 AM
Secretary of State

DOCUMENT # L04000030831

1. Entity Name
DAD PROPERTIES, LLC



Principal Place of Business
**5700 SADDLEBROOK WAY
WESLEY CHAPEL, FL 33543**

Mailing Address
**5700 SADDLEBROOK WAY
WESLEY CHAPEL, FL 33543**



02282006 No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-1056156

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

**RIEHLE, GREGORY R
5700 SADDLEBROOK WAY
WESLEY CHAPEL, FL 33543**

**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 re-issuing)

DATE

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

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGRM
DEMPSEY, THOMAS L
5700 SADDLEBROOK WAY
WESLEY CHAPEL, FL 33543**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGR
RIEHLE, GREGORY R
5700 SADDLEBROOK WAY
WESLEY CHAPEL, FL 33543**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGR
RIEHLE, DIANE
5700 SADDLEBROOK WAY
WESLEY CHAPEL, FL 33543**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGR
DEMPSEY, MAUREEN
5700 SADDLEBROOK WAY
WESLEY CHAPEL, FL 33543**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

U00000541747
05/10/06-80068-011 50.00

**DO NOT WRITE
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 118, 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 609, Florida Statutes.

SIGNATURE:

GREGORY R. RIEHLE

4/27/06

813-907-4481

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

Date

Daytime Phone #