

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000080511

FILED  
Sep 03, 2008  
Secretary of State

Entity Name: D & R DEVELOPMENTS, LLC

**Current Principal Place of Business:**

7307 15TH AVENUE NW  
BRADENTON, FL 34209

**New Principal Place of Business:**

**Current Mailing Address:**

7307 15TH AVENUE NW  
BRADENTON, FL 34209

**New Mailing Address:**

FEI Number: 20-2032037      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

**Name and Address of Current Registered Agent:**

**Name and Address of New Registered Agent:**

EBLING, JAMIE A  
1915 MANATEE AVENUE WEST  
BRADENTON, FL 34205      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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM      ( ) Delete  
Name: HOWLE, RICHARD J  
Address: 9 WHITLEY ROAD  
City-St-Zip: BALL GREEN, ST ST68BT UK

Title: MGRM      ( ) Delete  
Name: HAYNES, DAVID  
Address: 72 BIDDULPTH ROAD  
City-St-Zip: CHELL, ST ST66TB UK

**ADDITIONS/CHANGES:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: RICHARD HOWLE

MGRM

09/03/2008

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