


2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 13, 2006 08:00 AM
Secretary of State

DOCUMENT # L04000082318
 1. Entity Name
 DING LLC



Principal Place of Business
 14225 N BAYSHORE DR
 #8
 MADEIRA BEACH, FL 33708

Mailing Address
 115 BRIGHTWATER DR
 CLEARWATER BEACH, FL 33767

DO NOT WRITE IN THIS SPACE



02062006 No Chg-LLC CR2E083 (11/05)

4. FEI Number
 42-1650452

Applied For
 Not Applied

5. Certificate of Status Desired **\$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

DAVIES, GEORGE C
 115 BRIGHTWATER DR
 CLEARWATER BEACH, FL 33767

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8. This 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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when re-registering)

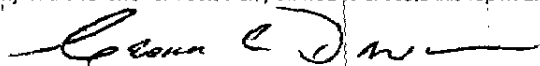
**Filing Fee is \$50.00
 Due by May 1, 2006**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR MARKS, DAWN D 115 BRIGHTWATER DR CLEARWATER BEACH, FL 33767
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR MARKS, IRWIN J 115 BRIGHTWATER DR CLEARWATER BEACH, FL 33767
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR DAVIES, NANCY M 115 BRIGHTWATER DR CLEARWATER BEACH, FL 33767
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR DAVIES, GEORGE C 115 BRIGHTWATER DR CLEARWATER BEACH, FL 33767
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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 02/23/06-80081-009 50.00

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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 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:  2/10/06

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #