

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000089351

FILED  
Mar 23, 2005  
Secretary of State

Entity Name: DFF BEACH, LLC

## Current Principal Place of Business:

511 ROYAL GREENS DRIVE  
TEMPLE TERRACE, FL 33617

## New Principal Place of Business:

## Current Mailing Address:

511 ROYAL GREENS DRIVE  
TEMPLE TERRACE, FL 33617

## New Mailing Address:

FEI Number: 35-2235943

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

JACKSON, FRANCES M  
511 ROYAL GREENS DRIVE  
TEMPLE TERRACE, FL 33617 US

## Name and Address of New Registered Agent:

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/MEMBERS:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES:

Title: MGR ( ) Change (X) Addition  
Name: JACKSON, FRANCES M  
Address: 511 ROYAL GREENS DR.  
City-St-Zip: TEMPLE TERRACE, FL 33617

Title: MGRM ( ) Change (X) Addition  
Name: GARCIA, FRANK J  
Address: 6610 HEATHERTON CT.  
City-St-Zip: TAMPA, FL 33617

Title: MGRM ( ) Change (X) Addition  
Name: VALENTI, DANIA  
Address: 6617 GLENCOE  
City-St-Zip: TEMPLE TERRACE, FL 33617

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: FRANCES JACKSON

MGR

03/23/2005

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