

# **2007 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000093430

**FILED**  
**Jan 15, 2007**  
**Secretary of State**

**Entity Name:** DAMKOEHLER PROPERTIES, LLC

**Current Principal Place of Business:**

6320 PASADENA POINT BLVD. S  
GULFPORT, FL 33707

**New Principal Place of Business:**

1700 66TH STREET NORTH STE 310  
SAINT PETERSBURG, FL 33710

**Current Mailing Address:**

6320 PASADENA POINT BLVD. S  
GULFPORT, FL 33707

**New Mailing Address:**

1700 66TH STREET NORTH STE 310  
SAINT PETERSBURG, FL 33710

**FEI Number:** 20-2107246

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DAMKOEHLER, TOD G  
6320 PASADENA POINT BLVD. S  
GULFPORT, FL 33707 US

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

DAMKOEHLER, TOD G  
1700 66TH STREET NORTH  
310  
SAINT PETERSBURG, FL 33710 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:

01/15/2007

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: DAMKOEHLER, TOD G  
Address: 6320 PASADENA POINT BLVD. S  
City-St-Zip: GULFPORT, FL 33707

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: DAMKOEHLER, TOD G  
Address: 1700 66TH STREET NORTH STE 310  
City-St-Zip: SAINT PETERSBURG, FL 33710

I hereby certify that the information supplied with this filing does not qualify for the 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: TOD DAMKOEHLER

PRES

01/15/2007

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