

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000000324

Entity Name: DTG PROPERTIES, LLC

FILED  
Apr 30, 2008  
Secretary of State

## Current Principal Place of Business:

6150 DIAMOND CENTRE COURT  
UNIT 1200  
FORT MYERS, FL 33912 US

## New Principal Place of Business:

4471 CAMINO REAL WAY  
FORT MYERS, FL 33966 US

## Current Mailing Address:

P.O. BOX 410970  
MELBOURNE, FL 32941 US

## New Mailing Address:

FEI Number: 20-2087354

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ASSAM, BRUCE L  
6150 DIAMOND CENTRE COURT  
#1200  
FORT MYERS, FL 33912 US

## Name and Address of New Registered Agent:

ASSAM, BRUCE L  
4471 CAMINO REAL WAY  
FORT MYERS, FL 33966 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: BRUCE L ASSAM

04/30/2008

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete  
Name: ASSAM, BRUCE L  
Address: PO BOX 410970  
City-St-Zip: MELBOURNE, FL 32941 US

Title: MGRM ( ) Delete  
Name: WINKELSETH, KENT  
Address: P.O. BOX 678411  
City-St-Zip: ORLANDO, FL 32867 US

## ADDITIONS/CHANGES:

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

Title: MGRM (X) Change ( ) Addition  
Name: WINKELSETH, KENT  
Address: P.O. BOX 410970  
City-St-Zip: MELBOURNE, FL 32941 US

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: BRUCE L ASSAM

MGRM

04/30/2008

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