

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000023784

Entity Name: D.S. SHADDAI, LLC

FILED  
Apr 22, 2006  
Secretary of State

**Current Principal Place of Business:**

3010 SOUTH THIRD STREET  
JACKSONVILLE BEACH, FL 32250

**New Principal Place of Business:**

**Current Mailing Address:**

3010 SOUTH THIRD STREET  
JACKSONVILLE BEACH, FL 32250

**New Mailing Address:**

FEI Number: 20-2506582

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

PATTERSON, BOND & LATSHAW, P.A.  
3010 SOUTH THIRD STREET  
JACKSONVILLE BEACH, FL 32250 US

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

PATTERSON, ANDERSON & FELDMAN, P.A.  
3010 SOUTH THIRD STREET  
JACKSONVILLE BEACH, FL 32250 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: LAWRENCE R. PATTERSON

04/22/2006

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: KRENEK, LEE J  
Address: P.O. BOX 2291  
City-St-Zip: PONTE VEDRA BEACH, FL 32004

Title: MGRM ( ) Delete  
Name: WINTER, DANON S  
Address: 6227 JAMISON COURT  
City-St-Zip: JACKSONVILLE, FL 32258

**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 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: LEE J. KRENEK

MGRM

04/22/2006

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