2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L05000046950

1. Entity Name D&L REALTY, LLC

Principal Place of Business

4301 ANCHOR PLAZA PARKWAY

SUITE 400

TAMPA, FL 33637

4301 ANCHOR PLAZA PARKWAY

SUITE 400

2-1-1-1

TAMPA, FL 33637

FILED Apr 03, 2008 08:00 AN Secretary of State



01072008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number 20-2821171

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

HARTER, CRAIG R 4301 ANCHOR PLAZA **STE 400** TAMPA, FL 33634

DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE.

Signature, typed or printed name of registered agent and title if applicable

(NOTE, Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75

04/15/08-80060-008 143.75

9.	MANAGING MEMBERS/MANAGERS
TITLE	MGRM
NAME	VARSAMES, LOU
STREET ADDRESS	7311 PELICAN ISLAND DRIVE
CITY-ST-ZIP	TAMPA, FL 33634
TITLE	MGRM
NAME	ROTHSCHILD, DOUG
STREET ADDRESS	4113 SALTWATER BLVD
CITY-ST-ZIP	TAMPA, FL 33615
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
IITLE	
NAME	
STREET ADDRESS	,
CITY-ST-ZIP	
11. I hereby certify that the information supplied with this filing does not qualify for the e	

DO NOT WRITE IN THIS SPACE

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 received true empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

SIGNATURE AND TYPE RINTED NAME OF SIGNING MANAGING MEMBER. OR AUTHORIZED REPRESENTATIVE