## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L05000047698

Entity Name: CDIPROPERTIES, LLC

1828 WHISPERING PINES CIRCLE

ENGLEWOOD, FL 34223

Address:

City-St-Zip:

FILED Mar 16, 2006 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 1828 WHISPERING PINES CIRCLE ENGLEWOOD, FL 34223 **Current Mailing Address: New Mailing Address:** 1828 WHISPERING PINES CIRCLE ENGLEWOOD, FL 34223 FEI Number: 51-0544958 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SPIEGEL & UTRERA, P.A. DROTAR, CHARLES G MANAGER 1840 SW 22ND ST. 1828 WHISPERING PINES CIRCLE 4TH FLOOR ENGLEWOOD, FL 34223 MIAMI, FL 33145 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: CHARLES G. DROTAR 03/16/2006 Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGR Title: () Change () Addition () Delete DROTAR, CHARLES G Name: Name: 1828 WHISPERING PINES CIRCLE Address: Address: ENGLEWOOD, FL 34223 City-St-Zip: City-St-Zip: Title: MGR () Delete Title: MEMB (X) Change ( ) Addition Name: DROTAR, KATHLEEN M Name: DROTAR, KATHLEEN M Address: 1828 WHISPERING PINES CIRCLE Address: 1828 WHISPERING PINES CIRCLE City-St-Zip: ENGLEWOOD, FL 34223 City-St-Zip: ENGLEWOOD, FL 34223 Title: () Delete Title: () Change () Addition DROTAR, KATHLEEN M Name: Name: 1828 WHISPERING PINES CIRCLE Address: Address: City-St-Zip: ENGLEWOOD, FL 34223 City-St-Zip: Title: ( ) Delete Title: () Change () Addition Name: DROTAR, CHARLES G Name:

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.

Address:

City-St-Zip:

SIGNATURE: CHARLES G. DROTAR MGR 03/16/2006