

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000047698

Entity Name: C D I PROPERTIES, LLC

**FILED**  
**Apr 20, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

1828 WHISPERING PINES CIRCLE  
ENGLEWOOD, FL 34223

**New Principal Place of Business:**

**Current Mailing Address:**

1828 WHISPERING PINES CIRCLE  
ENGLEWOOD, FL 34223

**New Mailing Address:**

FEI Number: 51-0544958

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

DROTAR, CHARLES G  
1828 WHISPERING PINES CIRCLE  
ENGLEWOOD, FL 34224 US

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: DROTAR, CHARLES G  
Address: 1828 WHISPERING PINES CIRCLE  
City-St-Zip: ENGLEWOOD, FL 34223

Title: MGRM  
Name: DROTAR, KATHLEEN M  
Address: 1828 WHISPERING PINES CIRCLE  
City-St-Zip: ENGLEWOOD, FL 34223

Title: MGRM  
Name: OLDE ENGLEWOOD REALTY, LLC  
Address: 1828 WHISPERING PINES CIRCLE  
City-St-Zip: ENGLEWOOD, FL 34223

Title: MGRM  
Name: CHARLES G DROTAR & KATHLEEN M DROTAR TRUST  
Address: 1828 WHISPERING PINES CIRCLE  
City-St-Zip: ENGLEWOOD, FL 34223

I hereby 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: CHARLES G. DROTAR

MGR

04/20/2012

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