

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000053885

FILED
Apr 15, 2009
Secretary of State

Entity Name: DBL&J, LIMITED LIABILITY COMPANY

Current Principal Place of Business:

5025 MAXWELL CIRCLE
#101
NAPLES, FL 34105 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 100956
CAPE CORAL, FL 33910 US

New Mailing Address:

5025 MAXWELL CIRCLE
#101
NAPLES, FL 34105 US

FEI Number: 03-0578790

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOFFMEISTER, HARRY F
5025 MAXWELL CIRCLE
101
NAPLES, FL 34105 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: MGRM () Delete
Name: BERENDT, DARRELL
Address: PO BOX 100956
City-St-Zip: CAPE CORAL, FL 33910 US

Title: MGRM () Delete
Name: HOFFMEISTER, HARRY F
Address: 5025 MAXWELL CIRCLE #101
City-St-Zip: NAPLES, FL 34105 US

Title: MGR () Delete
Name: BERENDT, LINDA
Address: PO BOX 100856
City-St-Zip: CAPE CORAL, FL 33910 US

Title: MGR () Delete
Name: HOFFMEISTER, JOSEPHINE
Address: 5025 MAXWELL CIRCLE #101
City-St-Zip: NAPLES, FL 34102 US

ADDITIONS/CHANGES:

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

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

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 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: HARRY F. HOFFMEISTER

MGMR

04/15/2009

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