

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000067225

FILED  
Feb 08, 2006  
Secretary of State

Entity Name: DUKES SIGNATURE HOMES LLC

**Current Principal Place of Business:**

4461 SW HAGAPLAN ST  
PORT SAINT LUCIE, FL 34953 US

**New Principal Place of Business:**

**Current Mailing Address:**

4461 SW HAGAPLAN ST  
PORT SAINT LUCIE, FL 34953 US

**New Mailing Address:**

FEI Number: 03-0569676      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

DUKES, DERRICK  
4461 SW HAGAPLAN ST  
PORT SAINT LUCIE, FL 34953 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: DUKES, DERRICK  
Address: 4461 SW HAGAPLAN ST  
City-St-Zip: PORT SAINT LUCIE, FL 34953 US

Title: MGR ( ) Delete  
Name: DUKES, ANNETTE  
Address: 4461 SW HAGAPLAN ST  
City-St-Zip: PORT SAINT LUCIE, FL 34953 US

Title: MGR ( ) Delete  
Name: DUKES, JAYDEN L  
Address: 4461 SW HAGAPLAN ST  
City-St-Zip: PORT SAINT LUCIE, FL 34953 US

Title: MGR ( ) Delete  
Name: DUKES, JORDAN S  
Address: 4461 SW HAGAPLAN ST  
City-St-Zip: PORT SAINT LUCIE, FL 34953 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 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: DERRICK DUKES

MGRM

02/08/2006

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