

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Jun 23, 2006 8:00 am**  
**Secretary of State**

05-15-2006 90242 038 \*\*\*\*50.00

|  |   |  |  |  |  |
|--|---|--|--|--|--|
| <b>DOCUMENT # L05000088799</b><br>1. Entity Name<br><b>DR INVESTMENTS, LLC</b>   |   |  |  |  |  |
| Principal Place of Business<br><b>4731 N. A1A<br/>SUITE 218 230<br/>VERO BEACH, FL 32963</b>   |   |  | Mailing Address<br><b>4731 N. A1A<br/>SUITE 218 230<br/>VERO BEACH, FL 32963</b> |  |  |
| 2. Principal Place of Business<br>Suite, Apt. #, etc.<br><b>SUITE 230</b>  |   |  | 3. Mailing Address<br>Suite, Apt. #, etc.<br><b>SUITE 230</b>                    |  |  |
| City & State<br>_____  |   |  | City & State<br>_____  |  |  |
| Zip<br>_____   |   | Country<br>_____                                     |  | 4. FEI Number<br><b>20-3432843</b>   |  |
| 5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required   |   |  |  | Applied For<br><input type="checkbox"/> Not Applicable   |  |
| 6. Name and Address of Current Registered Agent<br><b>DAMBRO, DAVID J<br/>1217 W. ISLAND CLUB SQ.<br/>VERO BEACH, FL 32963</b>   |   |  |  | 7. Name and Address of New Registered Agent<br>Name<br>_____<br>Street Address (P.O. Box Number is Not Acceptable)<br>_____<br>City<br><b>FL</b> Zip Code<br>_____ |  |
| 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.<br>SIGNATURE  DATE <b>5/9/06</b><br><small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when renewing)</small>   |   |  |  |  |  |
| Filing Fee is \$50.00<br>Due by September 8, 2006  |   | Make check payable to<br>Florida Department of State |  |  |  |
| 9. MANAGING MEMBERS/MANAGERS   |   |  | 10. ADDITIONS/CHANGES  |  |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP   | MGRM <input type="checkbox"/> Delete<br><b>DAVID JOSEPH DAMBRO FAMILY TRUST, 4/18/02</b><br><b>1217 W. ISLAND CLUB SQ.</b><br><b>VERO BEACH, FL 32963</b> |  | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                   | <input type="checkbox"/> Change <input type="checkbox"/> Addition  |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP   | MGRM <input type="checkbox"/> Delete<br><b>DEAN, RAYMOND N</b><br><b>12730 N. A1A</b><br><b>VERO BEACH, FL 32963</b>                                      |  | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                   | <input type="checkbox"/> Change <input type="checkbox"/> Addition  |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP   | <input type="checkbox"/> Delete   |  | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                   | <input type="checkbox"/> Change <input type="checkbox"/> Addition  |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP   | <input type="checkbox"/> Delete   |  | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                   | <input type="checkbox"/> Change <input type="checkbox"/> Addition  |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP   | <input type="checkbox"/> Delete   |  | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                   | <input type="checkbox"/> Change <input type="checkbox"/> Addition  |  |
| 11. 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 receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes. |   |  |  |  |  |
| SIGNATURE: <b>DAVID S. DAMBRO</b> <b>5/9/06</b> <b>772-231-4566</b><br><small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #</small>   |   |  |  |  |  |

30011101



ATTACHMENT  
30011101  
# L05000088799

DR Investments, LLC  
4731 N. A1A, Suite 230  
Vero Beach, FL 32963

5-9-06

Florida Department of State  
Division of Corporations  
P.O. Box 6478  
Tallahassee, FL 32314

Dear Sirs:

It has come to our attention that we missed the May 1 deadline to file the Annual Report for this Company due to an address error. Hurricane repairs stemming from both 2004 and 2005 season have necessitated a change in our office address. The correct address is listed above and corrected on the form.

Enclosed is a check for \$50.00. We ask that you please waive the late fee in consideration of the address problem. Thank you for your kind consideration in this matter.

Sincerely,



David J. Dambro