

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000063763

**FILED**  
**Feb 08, 2012**  
**Secretary of State**

**Entity Name:** DDDS PROPERTIES LLC

**Current Principal Place of Business:**

19812 GULF BLVD.  
INDIAN SHORES, FL 33785

**New Principal Place of Business:**

**Current Mailing Address:**

16527 HUTCHISON RD.  
ODESSA, FL 33556

**New Mailing Address:**

**FEI Number:** 59-3541876

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

IRWIN, SHERRI  
16527 HUTCHISON RD.  
ODESSA, FL 33556 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  
**Name:** IRWIN, SHERRI  
**Address:** 16527 HUTCHISON RD.  
**City-St-Zip:** ODESSA, FL 33556

**Title:** MGRM  
**Name:** IRWIN, DAVID  
**Address:** 16527 HUTCHISON RD.  
**City-St-Zip:** ODESSA, FL 33556

**Title:** MGRM  
**Name:** IRWIN, DONALD  
**Address:** 1534 BREHM RD.  
**City-St-Zip:** WESTMINSTER, MD 21157

**Title:** MGRM  
**Name:** IRWIN, DOROTHY  
**Address:** 1534 BREHM RD.  
**City-St-Zip:** WESTMINSTER, MD 21157

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:** DAVID IRWIN

VP

02/08/2012

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