

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000065155

FILED
Mar 30, 2009
Secretary of State

Entity Name: JDT PROPERTY HOLDINGS, LLC

Current Principal Place of Business:

12277 SW 55TH STREET
SUITE 906
COOPER CITY, FL 33330

New Principal Place of Business:

811 SHOTGUN ROAD
SUNRISE, FL 33326

Current Mailing Address:

12277 SW 55TH STREET
SUITE 906
COOPER CITY, FL 33330

New Mailing Address:

811 SHOTGUN ROAD
SUNRISE, FL 33326

FEI Number: 26-1199995

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LERMAN, CARLOS D
2611 HOLLYWOOD BLVD
HOLLYWOOD, FL 33020 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 () Delete
Name: DUKE, JR, GERALD W MGR
Address: 12277 SW 55TH STREET STE 906
City-St-Zip: COOPER CITY, FL 33330

Title: MGR () Delete
Name: DUKE, TERRELL W JR
Address: 12277 SW 55 ST 906
City-St-Zip: FORT LAUDERDALE, FL 33330

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: DUKE, JR, TERRELL W
Address: 811 SHOTGUN ROAD
City-St-Zip: SUNRISE, FL 33326

Title: MGR (X) Change () Addition
Name: DUKE, JR, GERALD
Address: 811 SHOTGUN ROAD
City-St-Zip: SUNRISE, FL 33326

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: TERRELL W DUKE JR

MGRM

03/30/2009

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