

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000122270

FILED  
Apr 25, 2007  
Secretary of State

**Entity Name:** DR PROPERTIES OF POLK COUNTY, LLC

**Current Principal Place of Business:**

355 WEST DAVIDSON ST.  
BARTOW, FL 33830

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 783  
BARTOW, FL 33831

**New Mailing Address:**

**FEI Number:** 20-8090084

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

JACKSON, DOUGLAS E  
355 WEST DAVIDSON ST.  
BARTOW, FL 33830 US

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

JACKSON, DOUGLAS E  
355 WEST DAVIDSON ST  
BARTOW, FL 33830 US

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: DOUGLAS E. JACKSON

04/25/2007

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: JACKSON, DOUGLAS E  
Address: PO BOX 783  
City-St-Zip: BARTOW, FL 33831

Title: MGRM ( ) Delete  
Name: PORTER, ROSS E  
Address: PO BOX 783  
City-St-Zip: BARTOW, FL 33831

**ADDITIONS/CHANGES:**

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: ROSS E. PORTER

MGRM

04/25/2007

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