

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000043038

FILED
Apr 28, 2008
Secretary of State

Entity Name: D.A. PROPERTY AND FUNDING SOLUTIONS, LLC

Current Principal Place of Business:

3616 HARDEN BLVD
#334
LAKELAND, FL 33803 US

New Principal Place of Business:

15414 SHOAL HAVEN PL
RUSKIN, FL 33573 US

Current Mailing Address:

3616 HARDEN BLVD
#334
LAKELAND, FL 33803 US

New Mailing Address:

13194 US HWY. 301 S
#321
RIVERVIEW, FL 33569 US

FEI Number: 20-8917893

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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: TERRAZAS, DAVID H
Address: 3616 HARDEN BLVD #334
City-St-Zip: LAKELAND, FL 33803 US

Title: MGRM () Delete
Name: SIHARATH, SOUKPHAPHONE A
Address: 3616 HARDEN BLVD #334
City-St-Zip: LAKELAND, FL 33803 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: TERRAZAS, DAVID H
Address: 13194 US HWY. 301 S #321
City-St-Zip: RIVERVIEW, FL 33569 US

Title: MGRM (X) Change () Addition
Name: SIHARATH, SOUKPHAPHONE A
Address: 13194 US HWY. 301 S #321
City-St-Zip: RIVERVIEW, FL 33569 US

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: DAVID H. TERRAZAS

MGRM

04/28/2008

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