


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 22, 2008 8:00 am
Secretary of State

02-22-2008 90038 042 ***143.75

DOCUMENT # L07000090925 1. Entity Name D & L BEACH PROPERTIES, LLC			
Principal Place of Business 309 JUPITER DR SATELLITE BEACH, FL 32937		Mailing Address 309 JUPITER DR SATELLITE BEACH, FL 32937	
2. Principal Place of Business - No P.O. Box # 309 JUPITER DR Suite, Apt. #, etc.		3. Mailing Address 309 JUPITER DR Suite, Apt. #, etc.	
City & State SATELLITE BEACH, FL Zip 32937		City & State SATELLITE BEACH, FL Zip 32937	
Country USA		Country USA	
4. FEI Number 26-0847981		Applied For <input checked="" type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$5.00 Additional Fee Required		01222008 Chg-LLC CR2E083 (12/06)	
6. Name and Address of Current Registered Agent GARDNER, DAVID 309 JUPITER DR SATELLITE BEACH, FL 32937		7. Name and Address of New Registered Agent Name Lisa GARDNER Street Address (P.O. Box Number is Not Acceptable) 309 JUPITER DRIVE City SATELLITE BEACH FL Zip Code 32937	
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. SIGNATURE <u>Lisa Gardner</u> Lisa GARDNER 2/1/08 <small>Signature, typed or printed name of registered agent and date if applicable. (NOTE: Registered Agent signature required when reinstating.) DATE</small>			
FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75		Make check payable to Florida Department of State	
9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP MGR GARDNER, DAVID 309 JUPITER DR SATELLITE BEACH, FL 32937	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP DELETE DAVID Gardner	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP MGR GARDNER, LISA 309 JUPITER DR SATELLITE BEACH, FL 32937	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP KEEP LISA GARDNER	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS 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 606, Florida Statutes.			
SIGNATURE: <u>Lisa Gardner</u> 2/1/08 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small>		<small>Date Daytime Phone #</small>	