

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000096226

FILED
Feb 18, 2008
Secretary of State

Entity Name: DOUBLE DOWN PROPERTIES, LLC

Current Principal Place of Business:

872 CYPRESS LAKE CIRCLE
FORT MYERS, FL 33919 US

New Principal Place of Business:

Current Mailing Address:

872 CYPRESS LAKE CIRCLE
FORT MYERS, FL 33919 US

New Mailing Address:

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JENSEN, PETER
872 CYPRESS LAKE CIRCLE
FORT MYERS, FL 33919 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: JENSEN, PETER
Address: 872 CYPRESS LAKE CIRCLE
City-St-Zip: FORT MYERS, FL 33919 US

Title: MGRM () Delete
Name: SMITH, JENNIFER
Address: 872 CYPRESS LAKE CIRCLE
City-St-Zip: FORT MYERS, FL 33919 US

Title: MGRM () Delete
Name: SMITH, MICHAEL
Address: 872 CYPRESS LAKE CIRCLE
City-St-Zip: FORT MYERS, FL 33919 US

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: PETER JENSEN

MGR

02/18/2008

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