

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000020350

**FILED**  
**Apr 07, 2011**  
**Secretary of State**

**Entity Name:** SDD TRUST HOLDINGS, LLC

**Current Principal Place of Business:**

9625 WES KEARNEY WAY  
RIVERVIEW, FL 33578

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 5299  
TAMPA, FL 33675

**New Mailing Address:**

9625 WES KEARNEY WAY  
RIVERVIEW, FL 33578

**FEI Number:** 26-4537270

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

REED, JAMES M  
9625 WES KEARNEY WAY  
RIVERVIEW, FL 33578 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  
**Name:** KEARNEY, BING CHARLES W JR  
**Address:** 9625 WES KEARNEY WAY  
**City-St-Zip:** TAMPA, FL 33578

**Title:** MGR  
**Name:** HARRIS, TRACY J JR  
**Address:** 9625 WES KEARNEY WAY  
**City-St-Zip:** RIVERVIEW, FL 33578

I hereby 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:** JAMES M REED

RA

04/07/2011

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