## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

**DOCUMENT # L98000001928** 

1. Entity Name DKB REALTY, L.L.C.



FILED Feb 15, 2007 08:00 A Secretary of State

Principal Place of Business

Mailing Address

4030 NW JOE'S POINT RD. Stuart, FL 34996 4030 NW JOE'S POINT RD. STUART, FL 34996



02032007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 65-0867973		Applied For Not Applicable
5. Certificate of Status Desired	\$5.00 Fee Req	Additional

## DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

BEARD, VERNON D 4030 NW JOE'S POINT RD. STUART, FL 34996

## DO NOT WRITE IN THIS SPACE

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.	Signature, typed or printed name of registered agent and the	de if applicable.	(NOTE: Registered	Agent signature required when reinstating)	DATE	
Filing Fee is \$50.00 Due by May 1, 2007				U00000637312 02/26/07-80055-006 50.00		
9. TITLE NAME	MANAGING MEMBERS, MGRM BEARD, VERNON D	MANAGERS				
STREET ADDRESS CITY-ST-ZIP	4030 NW JOE'S POINT RD. STUART, FL 34996					
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	,			IN '	THIS SPACE	
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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 608, Florida Statutes.

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

2/09/01

<u>772-225-8978</u>

Daytime Phone #