

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L98000001930

Entity Name: D.J.B. BUILDING, L.C.

FILED  
Mar 11, 2006  
Secretary of State

## Current Principal Place of Business:

3883 MAGARA TERRACE  
NORTH PORT, FL 34287

## New Principal Place of Business:

2446 DONGOLA ST  
NORTH PORT, FL 34286

## Current Mailing Address:

3883 MAGARA TERRACE  
NORTH PORT, FL 34287

## New Mailing Address:

2446 DONGOLA ST  
NORTH PORT, FL 34286

FEI Number: 65-0871474

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BATES, DONALD J  
3883 MAGARA TERRACE  
NORTH PORT, FL 34287 US

## Name and Address of New Registered Agent:

BATES, DONALD J  
2446 DONGOLA ST  
NORTH PORT, FL 34286 US

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: DONALD J BATES

03/11/2006

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete  
Name: BATES, DONALD J  
Address: 3883 MAGARA TERRACE  
City-St-Zip: NORTH PORT, FL 34287

Title: MGRM ( ) Delete  
Name: BATES, DONNA M  
Address: 3883 MAGARA TERR  
City-St-Zip: NORTH PORT, FL 34287

## ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition  
Name: BATES, DONALD J  
Address: 2446 DONGOLA ST  
City-St-Zip: NORTH PORT, FL 34286

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

I hereby certify that the information supplied with this filing does not qualify for the 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: DONALD J BATES

MGR

03/11/2006

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