# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**
**Jan 07, 2005**
**Secretary of State**

DOCUMENT# M00000001299

**Entity Name:** DD53, LLC

**Current Principal Place of Business:**

115 WEST CANON PERDIDO, SUITE 200
SANTA BARBARA, CA 93101

**New Principal Place of Business:**

115 WEST CANON PERDIDO
SANTA BARBARA, CA 93101

**Current Mailing Address:**

115 WEST CANON PERDIDO, SUITE 200
SANTA BARBARA, CA 93101

**New Mailing Address:**

115 WEST CANON PERDIDO
SANTA BARBARA, CA 93101

**FEI Number: 77-0547226** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

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

PARACORP INCORPORATED
236 EAST 6TH AVENUE
TALLAHASSEE, FL 32303 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/MEMBERS:**

Title: P ( ) Delete
Name: KNELL, JAMES P
Address: 115 W CANON PERDIDO, STE 200
City-St-Zip: SANTA BARBARA, CA 93107

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition
Name: KNELL, JAMES P
Address: 115 W CANON PERDIDO
City-St-Zip: SANTA BARBARA, CA 93107

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JAMES P KNELL MGRM 01/07/2005

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