


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 21, 2008 08:00 A
Secretary of State


DOCUMENT # M02000001148

1. Entity Name
 D-A PROPERTIES II, LLC



Principal Place of Business 1745 SW 12TH AVE OCALA, FL 34474	Mailing Address 1340 WEST 29TH STREET INDIANAPOLIS, IN 46208
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DO NOT WRITE IN THIS SPACE



03142008 No Chg-LLC CR2E083 (12/07)

4. FEI Number 36-4492832	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
 1200 SOUTH PINE ISLAND ROAD
 PLANTATION, FL 33324

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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

000000907898
 05/06/08-80008-009-138.75

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM PROTOGERE, MICHAEL 4547 LINCOLN ROAD INDIANAPOLIS, IN 46228
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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: *Michael ProtoGERE* MICHAEL PROTOGERE 4/14/08 (317) 941-2114

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #