

# **2009 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M06000004656

Entity Name: D & D ABITA SPRINGS, LLC

**FILED**  
**Apr 03, 2009**  
**Secretary of State**

**Current Principal Place of Business:**

15276 DEDEAUX ROAD  
GULFPORT, MS 39503

**New Principal Place of Business:**

12287 HWY 49  
GULFPORT, MS 39503

**Current Mailing Address:**

P O BOX 3226  
GULFPORT, MS 39505

**New Mailing Address:**

FEI Number: 20-5109415

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

REGISTERED AGENT SOLUTIONS, INC.  
155 OFFICE PLAZA DR.  
SUITE A  
TALLAHASSEE, FL 32301 US

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

STEVE ANDREWS  
997 INDUSTRIAL DRIVE  
CRESTVIEW, FL 32539 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: STEVE ANDREWS

04/03/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: GORDON, T. DAVIS  
Address: P.O. BOX 3226  
City-St-Zip: GULFPORT, MS 39505

**ADDITIONS/CHANGES:**

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

I hereby certify that the information supplied with this filing does not qualify 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: DON PICOLO

CFO

04/03/2009

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