2008 FOR PROFIT CORPORATION ANNUAL REPORT

Apr 07, 2008 08:00 A Secretary of State DOCUMENT # S47111 1. Entity Name D & D PROPERTIES, INC. Mailing Address Principal Place of Business 5516 OLD SCOTT LAKE RD 5516 OLD SCOTT LAKE RD LAKELAND, FL 33813 LAKELAND, FL 33813 01062008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3073419 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent **HUNTER, DENISE M** DO NOT WRITE 5516 OLD SCOTT LAKE RD LAKELAND, FL 33813 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 inted name of registered agent and little if applicable (NOTE Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 U00000883422 Trust Fund Contribution. Added to Fees After May 1, 2008 Fee will be \$550.00 04/17/08-80003-007 150 00 OFFICERS AND DIRECTORS 10. TITLE HUNTER, DENISE M NAME 5516 OLD SCOTT LAKE RD STREET ADDRESS CITY-ST-ZIP LAKELAND, FL 33813 TITLE NAME STREET ADDRESS CITY ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-7IP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-7IP TITLE NAME STREET ADDRESS

12. 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 or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if chapter on an attachment with an address, with allighter like empowered.

SIGNATURE:

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

luur M. Dustu

Derise M. Hunter

(863) 644 - 7891

FILED