

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M08000004471

Entity Name: DPI OF DELAWARE, LLC

FILED  
Feb 09, 2012  
Secretary of State

**Current Principal Place of Business:**

5005 N. STATELINE AVENUE  
TEXARKANA, TX 75503

**New Principal Place of Business:**

**Current Mailing Address:**

5005 N. STATELINE AVENUE  
TEXARKANA, TX 75503

**New Mailing Address:**

FEI Number: 20-5063341

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 323012525 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/MANAGERS:**

Title: MGRM  
Name: LEEPER, JASON  
Address: 6902 SUGAR CREST  
City-St-Zip: TEXARKANA, AR 71854

Title: MGRM  
Name: YORK, THOMAS  
Address: 6616 LAKE RIDGE DRIVE  
City-St-Zip: TEXARKANA, TX 75503

Title: MGRM  
Name: THOMPSON, RITCHIE  
Address: 130 MICAH T. ROAD  
City-St-Zip: HAUGHTON, LA 71037

Title: MGRM  
Name: MCMILLON, DONALD  
Address: 9304 DANUBE  
City-St-Zip: TEXARKANA, TX 75503

I hereby 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: THOMAS YORK

CEO

02/09/2012

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