

2016 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M09000001844

Entity Name: DCS FAIRBANKS PROPERTIES, LLC**Current Principal Place of Business:**6700 HOLLISTER
HOUSTON, TX 77040**Current Mailing Address:**1 REYNOLDS WAY
ATTN: TAX DEPT
KETTERING, OH 45430 US**FEI Number:** 42-1575273**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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:**_____
Electronic Signature of Registered Agent_____
Date**Authorized Person(s) Detail :**

Title MGR
Name BROCKMAN, ROBERT T
Address 6700 HOLLISTER
City-State-Zip: HOUSTON TX 77040

Title MGR
Name AGAN, DAN S
Address 6700 HOLLISTER
City-State-Zip: HOUSTON TX 77040

Title MGR
Name JONES, TERRY W
Address 6700 HOLLISTER
City-State-Zip: HOUSTON TX 77040

Title MANAGER
Name MOSS, M CRAIG
Address 6700 HOLLISTER
City-State-Zip: HOUSTON TX 77040

Title MGR
Name NALLEY, ROBERT M
Address 6700 HOLLISTER
City-State-Zip: HOUSTON TX 77040

Title MGR
Name COOPER, CARLAN M
Address 200 QUALITY CIRCLE
City-State-Zip: COLLEGE STATION TX 77845

Title MGR
Name BALES, MARK F.
Address ONE REYNOLDS WAY
City-State-Zip: KETTERING OH 45430

Title MANAGER
Name BURNETT, REBERT D
Address 6700 HOLLISTER
City-State-Zip: HOUSTON TX 77040

I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MARK F BALES**MANAGER****03/30/2016**_____
Electronic Signature of Signing Authorized Person(s) Detail_____
Date