

**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

DOCUMENT # L00000004948

1. Entity Name
D&S, LLC.



Principal Place of Business
**736 SCOTLAND STREET
DUNEDIN, FL 34698**

Mailing Address
**736 SCOTLAND STREET
DUNEDIN, FL 34698**

DO NOT WRITE IN THIS SPACE

**FILED
Jan 24, 2005 08:00 AM
Secretary of State**



01102005 No Chg LLC CR2E03 (FL/03)

4. EIN Number 59-3419344	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$5.00 Additional Fee/Required

G. Name and Address of Current Registered Agent

**DEURICA, JOHN IN
736 SCOTLAND STREET
DUNEDIN, FL 34698**

**DO NOT WRITE
IN THIS SPACE**

3. 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:

(Signature typed or printed name of registered agent and title and date.)

(NOTE: Pay record signature and date required when notating.)

DATE

**Filing Fee is \$50.00
Due by May 1, 2005**

9. MANAGING MEMBERS/MANAGERS

TITLE	NAME
NAME	DEURICA, JOHN
STREET ADDRESS	736 SCOTLAND STREET
CITY ST ZIP	DUNEDIN, FL 34698

**000000190379
01/24/05-80133-011 150.00**

TITLE	NAME
NAME	
STREET ADDRESS	
CITY ST ZIP	

TITLE	NAME
NAME	
STREET ADDRESS	
CITY ST ZIP	

TITLE	NAME
NAME	
STREET ADDRESS	
CITY ST ZIP	

TITLE	NAME
NAME	
STREET ADDRESS	
CITY ST ZIP	

**DO NOT WRITE
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 110.07(3)(i) 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. I shall be 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: *[Signature]*

SIGNATURE AND PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Jan 14 05 727-734-1837

DATE

Florida Secretary of State