

# 2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000004875

Entity Name: DHSM GROUP, LLC

FILED  
Feb 01, 2010  
Secretary of State

**Current Principal Place of Business:**

19 DAVID STREET  
FORT WALTON BEACH, FL 32547

**New Principal Place of Business:**

**Current Mailing Address:**

POST OFFICE BOX 1808  
FORT WALTON BEACH, FL 32549

**New Mailing Address:**

FEI Number: 02-0566945

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

LORD, LEVEN D  
19 DAVID STREET  
FORT WALTON BEACH, FL 32547 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: MGR  
Name: LORD, LEVEN D  
Address: 19 DAVID STREET  
City-St-Zip: FORT WALTON BEACH, FL 32547

Title: MGRM  
Name: LORD, GAIL E  
Address: 578 L'OMBRE COURT  
City-St-Zip: FORT WALTON BEACH, FL 32547

Title: MGRM  
Name: LORD, LEVEN D II  
Address: 3 PEMBROKE PLACE, NE  
City-St-Zip: FORT WALTON BEACH, FL 32547

Title: MGRM  
Name: LOBNER, MICHAEL J  
Address: 17 BAY DRIVE, SE  
City-St-Zip: FORT WALTON BEACH, FL 32548

Title: MGRM  
Name: LOBNER, STEPHANIE G  
Address: 17 BAY DRIVE, SE  
City-St-Zip: FORT WALTON BEACH, FL 32548

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: LEVEN D. LORD

MGR

02/01/2010

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