

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L02000007867

Entity Name: DSE, LLC

**FILED**  
**Apr 07, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

429 FIDDLERS POINT DR.  
SAINT AUGUSTINE, FL 32080

**New Principal Place of Business:**

177 SUMMERHILL CIRCLE  
SAINT AUGUSTINE, FL 32086

**Current Mailing Address:**

429 FIDDLERS POINT DR.  
SAINT AUGUSTINE, FL 32080

**New Mailing Address:**

177 SUMMERHILL CIRCLE  
SAINT AUGUSTINE, FL 32086

FEI Number: 58-2484994

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

HICKS, HAROLD G JR  
429 FIDDLERS POINT DR.  
SAINT AUGUSTINE, FL 32080 US

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

HICKS, HAROLD G JR  
177 SUMMERHILL CIRCLE  
SAINT AUGUSTINE, FL 32086 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:

04/07/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: HICKS, HAROLD G JR  
Address: 177 SUMMERHILL CIRCLE  
City-St-Zip: SAINT AUGUSTINE, FL 32086

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: HAROLD G HICKS JR.

MGR

04/07/2012

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