

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000013630

Entity Name: DRSM, L.L.C.

FILED
Mar 19, 2009
Secretary of State

Current Principal Place of Business:

105 CYPRESS POINT PKWY
SUITE A
PALM COAST, FL 32164

New Principal Place of Business:

Current Mailing Address:

105 CYPRESS POINT PKWY
SUITE A
PALM COAST, FL 32164

New Mailing Address:

FEI Number: 04-3687996

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHIUMENTO, MICHAEL D III
4 OLD KINGS ROAD NORTH, SUITE B
PALM COAST, FL 32137 US

Name and Address of New Registered Agent:

PILE, MIKE
1655 N CLYDE MORRIS BLVD
DAYTONA BEACH, FL 32117 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: WPADGEDORNE

03/19/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: DORNE, WILLIAM P JR.
Address: 1540 LAMBERT AVENUE
City-St-Zip: FLAGLER BEACH, FL 32136

Title: MGRM () Delete
Name: MAGEE, SHAWN P
Address: 94 TROTTERS LANE
City-St-Zip: FLAGLER BEACH, FL 32136

Title: MGRM () Delete
Name: SECUNDA, RICHARD M
Address: 5738 N. OCEANSHORE BLVD
City-St-Zip: PALM COAST, FL 32137

Title: MGRM () Delete
Name: ROCKEY, DAVID S
Address: 27 AUDUBON LANE
City-St-Zip: FLAGLER BEACH, FL 32137

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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: WPADGEDORNE

MGR

03/19/2009

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