


**2005 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Apr 04, 2005 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # L02000018816</b> 1. Entity Name DZA BRANDS, LLC	
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Principal Place of Business 2110 EXECUTIVE DRIVE, P.O. BOX 1330 SALISBURY, NC 28145-1330	Mailing Address 2110 EXECUTIVE DRIVE, P.O. BOX 1330 SALISBURY, NC 28145-1330
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**DO NOT WRITE IN THIS SPACE**



01102005No Chg-LLC

CR2E083 (10/03)

4. FEI Number 51-0469905	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent  CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525	<b>DO NOT WRITE IN THIS SPACE</b>
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8. 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 \_\_\_\_\_ (NOTE: Registered Agent signature required when re-registering) DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable

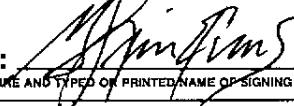
**Filing Fee is \$50.00  
Due by May 1, 2005**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P WALKER, MICHAEL R 2110 EXECUTIVE DRIVE SALISBURY, NC 28147
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V Jr. DIXON, GLENN R 2110 EXECUTIVE DRIVE SALISBURY, NC 28147
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S EVANS, LINN G 2110 EXECUTIVE DRIVE SALISBURY, NC 28147
TITLE NAME STREET ADDRESS CITY - ST - ZIP	AS HAYES, JOSEPH III 2110 EXECUTIVE DRIVE SALISBURY, NC 28147
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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04/04/05-80035-010 50.00

**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 119.07(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, 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:**  G. Linn Evans March 24, 2005 (704) 633-8250  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #