

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000024559

FILED
Jun 29, 2009
Secretary of State

Entity Name: D&G SALES ASSOCIATES, L.L.C.

Current Principal Place of Business:

2715 W. PRICE
TAMPA, FL 33611

New Principal Place of Business:

Current Mailing Address:

2715 W. PRICE
TAMPA, FL 33611

New Mailing Address:

FEI Number: 27-0031023

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DENNIS, MARLENE P DPS
2715 W. PRICE AVE.
TAMPA, FL 33611 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: MGRM () Delete
Name: GURSKY, RICK
Address: 2916 WESTCHESTER AVE
City-St-Zip: ORLANDO, FL 32803

Title: MGRM () Delete
Name: GURSKY, RICK
Address: 2916 WESTCHESTER AVE
City-St-Zip: ORLANDO, FL 32803

Title: MGRM () Delete
Name: DENNIS, MARLENE P DPS
Address: 2715 W PRICE
City-St-Zip: TAMPA, FL 33611

Title: MGRM () Delete
Name: DENNIS, MARLENE
Address: 2715 W PRICE
City-St-Zip: TAMPA, FL 33611

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: MARLENE DENNIS

PART

06/29/2009

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