

2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

FILED
May 14, 2003 8:00 am
Secretary of State

05-14-2003 90026 040 ****50.00

DOCUMENT # L02000024559

1. Entity Name

D&G SALES ASSOCIATES, L.L.C.



Principal Place of Business

**2916 WESTCHESTER AVE.
ORLANDO FL 32803**

Mailing Address

**2916 WESTCHESTER AVE.
ORLANDO FL 32803**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



☐ CHECK HERE IF MAKING CHANGES

4. FEI Number

27-0031023

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

**GURSKY, RICK
2916 WESTCHESTER AVE.
ORLANDO FL 32803**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Florida Department of State
Due By May 1, 2003

9. MANAGING MEMBERS/MANAGERS

TITLE ☒ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☒ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

10. ADDITIONS/CHANGES

TITLE ☐ Change ☒ Addition
NAME **President MGRM**
STREET ADDRESS **Rick Gursky**
CITY-ST-ZIP **2916 Westchester Ave. Orlando FL 32803**

TITLE ☐ Change ☒ Addition
NAME **Vice-President MGRM**
STREET ADDRESS **Marlene Dennis**
CITY-ST-ZIP **2715 W Price Tampa FL 33611**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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 *Rick Gursky* **SIGNATURE REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

5/9/03 407 897 3381

Date Daytime Phone #

CR2E083 (10/02)

Attachment
#102000024559
10104660

D & G SALES ASSOCIATES, LLC

Rick Gursky

2916 Westchester Ave

Orlando, FL 32803

Phone: 407-897-3381

Fax: 407-897-2037

FAX COVER SHEET

To: <i>Whom it may concern, Div. of Corporations</i>	From: <i>Rick Gursky</i>
Attn:	Date: <i>5/12/03</i>
Fax number:	RE: <i>Form 2003</i>

Total Pages including cover:

COMMENTS:

Please excuse the lateness of our form 2003 and payment. I became severely ill for several weeks and required home rest and no working. There was no one else available to complete the form or, to sign it. My condition has improved and I am back at work. Thank you for your understanding.

Kindest regards

*Rick Gursky
D & G Sales Assoc, LLC*