


2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 26, 2007 08:00 AM
Secretary of State

DOCUMENT # L03000007168	
1. Entity Name DS, INVESTMENTS, L.L.C.	

Principal Place of Business 13815 NORTH INDIAN RIVER DRIVE SEBASTIAN, FL 32958	Mailing Address 13815 NORTH INDIAN RIVER DRIVE SEBASTIAN, FL 32958
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02282007No Chg-LLC CR2E083 (11/05)

4. FEI Number 20-0171951	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

STADNIK, DONALD E
 13815 NORTH INDIAN RIVER DRIVE
 SEBASTIAN, FL 32958

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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 _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

**Filing Fee is \$50.00
 Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM STADNIK, DONALD E 13815 N INDIAN RIVER DRIVE SEBASTIAN, FL 32958
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM STADNIK, JUNE A 13815 N INDIAN RIVER DRIVE SEBASTIAN, FL 32958
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 04/02/07-80029-009 50.00

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: *June A. Stadnik* 3/22/2007 772.388.2405
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #