

# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000014578

**FILED**  
**Mar 28, 2004**  
**Secretary of State**

**Entity Name:** DISCOUNT BROKERAGE SERVICES, LLC

**Current Principal Place of Business:**

C/O CC MARKETING GROUP  
530 MORNINGSIDE DRIVE  
PONTE VEDRA BEACH, FL 32082

**New Principal Place of Business:**

330 A1A NORTH  
SUITE 323  
PONTE VEDRA BEACH, FL 32082

**Current Mailing Address:**

C/O ROBERT V. DUSS  
1050 RIVERSIDE AVENUE  
JACKSONVILLE, FL 322044123 US

**New Mailing Address:**

C/O ROBERT JACKSON  
1331 1ST. STREET NORTH - SUITE 404  
JACKSONVILLE BEACH, FL 32250 US

**FEI Number:** 11-3687051

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

DUSS, ROBERT V  
1050 RIVERSIDE AVENUE  
JACKSONVILLE, FL 322044123 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/MEMBERS:**

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title: MGRM ( ) Change (X) Addition  
Name: REYNOLDS, LORRI  
Address: 330 A1A NORTH - SUITE 323  
City-St-Zip: PONTE VEDRA BEACH, FL 32082

I hereby certify that the information supplied with this filing does not qualify for the 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 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:** LORRI REYNOLDS

MGRM

03/28/2004

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