

# **2010 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L04000031772

Entity Name: DV SQUARED LLC

**FILED**  
**May 08, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

316 EIGHTH AVENUE  
LEHIGH ACRES, FL 33936 US

**New Principal Place of Business:**

4395 CORPORATE SQUARE  
NAPLES, FL 34104 US

**Current Mailing Address:**

316 EIGHTH AVENUE  
LEHIGH ACRES, FL 33936 US

**New Mailing Address:**

4395 CORPORATE SQUARE  
NAPLES, FL 34104 US

FEI Number: 20-1046901

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

VAN LOON, DAVID R  
316 EIGHTH AVENUE  
LEHIGH ACRES, FL 33936 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  
Name: VAN LOON, DAVID R  
Address: 316 EIGHTH AVENUE  
City-St-Zip: LEHIGH ACRES, FL 33936 US

Title: MGR  
Name: BUDD, RUSSELL A  
Address: 5981 SHADY OAKS LANE  
City-St-Zip: NAPLES, FL 34119 US

I hereby 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: DAVID R. VAN LOON

MMGR

05/08/2010

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