

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000096724

Entity Name: DC GROUP HOLDINGS, LLC

FILED  
Feb 19, 2009  
Secretary of State

## Current Principal Place of Business:

1219 US HWY 301 NORTH, SUITE A  
TAMPA, FL 33619

## New Principal Place of Business:

1219 US HWY 301 NORTH  
SUITE A  
TAMPA, FL 33619

## Current Mailing Address:

1219 US HWY 301 NORTH, SUITE A  
TAMPA, FL 33619

## New Mailing Address:

1219 US HWY 301 NORTH  
SUITE A  
TAMPA, FL 33619

FEI Number: 30-0338673

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CARR, DAVID  
501 NORTH MORGAN STEET, SUITE 203  
TAMPA, FL 33602 US

## Name and Address of New Registered Agent:

CARR, DAVID  
501 NORTH MORGAN STREET  
SUITE 203  
TAMPA, FL 33602 US

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:

02/19/2009

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete  
Name: TURBEVILLE, DEWEY  
Address: 1219 US HWY 301 NORTH, SUITE A  
City-St-Zip: TAMPA, FL 33619

Title: MGRM ( ) Delete  
Name: FRIEND, LEWIS C  
Address: 1219 US HWY 301 NORTH, SUITE A  
City-St-Zip: TAMPA, FL 33619

## ADDITIONS/CHANGES:

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: DEWEY TURBEVILLE

MGRM

02/19/2009

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