

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000113102

FILED  
Apr 27, 2009  
Secretary of State

Entity Name: DCD DOT COM LLC

**Current Principal Place of Business:**

4025 TAMPA ROAD, SUITE 1205  
OLDSMAR, FL 34677

**New Principal Place of Business:**

4025 TAMPA ROAD, SUITE 1107B  
OLDSMAR, FL 34677

**Current Mailing Address:**

4025 TAMPA ROAD, SUITE 1205  
OLDSMAR, FL 34677

**New Mailing Address:**

4025 TAMPA ROAD, SUITE 1107B  
OLDSMAR, FL 34677

FEI Number: 51-0628482

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

JOHNSON, MELVIN L  
4025 TAMPA ROAD  
SUITE 1205  
OLDSMAR, FL 34677 US

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

JOHNSON, MELVIN L  
4025 TAMPA ROAD  
SUITE 1107B  
OLDSMAR, FL 34677 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:

04/27/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: JOHNSON, MEL  
Address: 4025 TAMPA ROAD, SUITE 1205  
City-St-Zip: OLDSMAR, FL 34677

Title: MGR ( ) Delete  
Name: SULLIVAN, JON  
Address: 4025 TAMPA ROAD, SUITE 1205  
City-St-Zip: OLDSMAR, FL 34677

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: JOHNSON, MEL  
Address: 4025 TAMPA ROAD, SUITE 1107B  
City-St-Zip: OLDSMAR, FL 34677

Title: MGR (X) Change ( ) Addition  
Name: SULLIVAN, JON  
Address: 4025 TAMPA ROAD, SUITE 1107B  
City-St-Zip: OLDSMAR, FL 34677

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: MELVIN JOHNSON

MGR

04/27/2009

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