

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000115339

FILED
May 01, 2007
Secretary of State

Entity Name: DS GOD LLC

Current Principal Place of Business:

1540 SW 48TH TR
CAPE CORAL, FL 33914

New Principal Place of Business:

Current Mailing Address:

1540 SW 48TH TR
CAPE CORAL, FL 33914

New Mailing Address:

FEI Number: 55-0909873 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

BERARDI, CHRISTOPHER
1540 SW 48TH TR
CAPE CORAL, FL 33914 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: _____

Electronic Signature of Registered Agent

_____ Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: BERARDI, CHRISTOPHER
Address: 1232 SE 21ST AVE
City-St-Zip: CAPE CORAL, FL 33990

Title: MGRM () Delete
Name: LEONARD, ALAN
Address: 1232 SE 21ST AVE
City-St-Zip: CAPE CORAL, FL 33990

Title: MGRM () Delete
Name: SENGER, KEVIN
Address: 1232 SE 21ST AVE
City-St-Zip: CAPE CORAL, FL 33990

Title: MGRM () Delete
Name: SMEDES, JOHN
Address: 311 SW 32ND PL
City-St-Zip: CAPE CORAL, FL 33991

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: JOHN SMEDES

MGRM

05/01/2007

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