

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000064555

Entity Name: DSD PARTNERS LLC

FILED
May 04, 2007
Secretary of State

Current Principal Place of Business:

2113 CLUSTER BRANCH COURT
LONGWOOD, FL 32779

New Principal Place of Business:

Current Mailing Address:

2113 CLUSTER BRANCH COURT
LONGWOOD, FL 32779

New Mailing Address:

FEI Number: 30-0368942 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:

ROBERTSON, SCOT C
2113 CLUSTER BRANCH COURT
LONGWOOD, FL 32779 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: MGRM () Delete
Name: ROBERTSON, SCOT C
Address: 2113 CLUSTER BRANCH COURT
City-St-Zip: LONGWOOD, FL 32779

Title: MGRM () Delete
Name: SIPE, DONOVAN M
Address: 19441 SURF DRIVE
City-St-Zip: HUNTINGTON BEACH, CA 92648

Title: MGRM () Delete
Name: JERGER, DARIN M
Address: 326 WALNUT ST.
City-St-Zip: COSTA MESA, CA 92627

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:

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: SCOT C. ROBERTSON

CFO

05/04/2007

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