

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000111503

Entity Name: DCSS PROPERTIES, LLC

**FILED**  
**Feb 24, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

1511 WILLIAMS ROAD  
PLANT CITY, FL 33565

**New Principal Place of Business:**

**Current Mailing Address:**

1511 WILLIAMS ROAD  
PLANT CITY, FL 33565

**New Mailing Address:**

FEI Number: 20-8196090

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CALI, LARRY D  
1511 WILLIAMS ROAD  
PLANT CITY, FL 33565 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: MGR  
Name: CALI, LARRY D  
Address: 13387 GAVIN RD  
City-St-Zip: DOVER, FL 33527

Title: D  
Name: SWINDLE, RAYMOND E  
Address: 12142 MCINTOSH RD  
City-St-Zip: THONOTOSASSA, FL 33592

Title: D  
Name: DRAWDY, DAVID L  
Address: 1511 WILLIAMS RD  
City-St-Zip: PLANT CITY, FL 33565

Title: D  
Name: STALLINGS, GARY E  
Address: 5903 IKE SMITH RD  
City-St-Zip: PLANT CITY, FL 33565

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: LARRY CALI

MGR

02/24/2011

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