

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000063383

FILED
Apr 29, 2008
Secretary of State

Entity Name: DG & FW L.L.C.

Current Principal Place of Business:

14600 KRISTENRIGHT LANE
ORLANDO, FL 32826 US

New Principal Place of Business:

Current Mailing Address:

14600 KRISTENRIGHT LANE
ORLANDO, FL 32826 US

New Mailing Address:

FEI Number: 26-0368089

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

A.R.S. & ASSOCIATES INC.
20810 WEST DIXIE HIGHWAY
NORTH MIAMI BEACH, FL 33180 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 () Delete
Name: GABRIEL, DOUG
Address: 14600 KRISTENRIGHT LANE
City-St-Zip: ORLANDO, FL 32826 US

Title: MGR () Delete
Name: WASHINGTON, FABIAN
Address: 14600 KRISTENRIGHT LANE
City-St-Zip: ORLANDO, FL 32826 US

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

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

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

Title: MGRM () Change (X) Addition
Name: JOHNSON, KRISTAL
Address: 14600 KRISTENRIGHT LANE
City-St-Zip: ORLANDO, FL 32826

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: DOUG GABRIEL

MGR

04/29/2008

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