## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L07000064163

City-St-Zip:

POLK CITY, FL 33868

Entity Name: D & S ATTORNEY SUPPORT GROUP, L.L.C.

FILED May 08, 2008 Secretary of State

**New Principal Place of Business: Current Principal Place of Business:** 295 W SUMMERLIN STREET BARTOW, FL 33830 **Current Mailing Address: New Mailing Address:** PO OBX 1536 BARTOW, FL 33830 FEI Number: 36-4611007 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: WATWOOD, DAVID E DORMAN, STEPHANIE J 295 W SUMMERLIN STREET 295 W SUMMERLIN STREET BARTOW, FL 33830 BARTOW, FL 33830 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: STEPHANIE J. DORMAN 05/08/2008 Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGRM () Delete Title: () Change () Addition WATWOOD, DAVID E Name: Name: Address: PO BOX 1536 Address: City-St-Zip: BARTOW, FL 33831 City-St-Zip: Title: MGRM ( ) Delete Title: () Change () Addition Name: DORMAN, STEPHANIE J Name: Address: 8803 HAMMOCK LOOP 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: DAVID E. WATWOOD MR. 05/08/2008