

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000095485

Entity Name: DEKOTS PRODUCTS, LLC

FILED  
Feb 17, 2008  
Secretary of State

## Current Principal Place of Business:

4830 W. KENNEDY BLVD.  
STE. 750  
TAMPA, FL 33609

## New Principal Place of Business:

4830 W. KENNEDY BLVD.  
STE. 575  
TAMPA, FL 33609

## Current Mailing Address:

4830 W. KENNEDY BLVD.  
STE. 750  
TAMPA, FL 33609

## New Mailing Address:

4830 W. KENNEDY BLVD.  
STE. 575  
TAMPA, FL 33609

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HENNEKE, ROB  
16912 EQUESTRIAN TRAIL  
ODESSA, FL 33556 US

## Name and Address of New Registered Agent:

HALL, W. CRAIG  
4830 W. KENNEDY BLVD.  
SUITE 575  
TAMPA, FL 33609 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: W. CRAIG HALL

02/17/2008

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete  
Name: HENNEKE, ROB  
Address: 16912 EQUESTRIAN TRAIL  
City-St-Zip: ODESSA, FL 33556

## ADDITIONS/CHANGES:

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: ROB HENNEKE

MGR

02/17/2008

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