

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000095485

FILED
Feb 10, 2009
Secretary of State

Entity Name: DEKOTS PRODUCTS, LLC

Current Principal Place of Business:

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

New Principal Place of Business:

Current Mailing Address:

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

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

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

MGRM

02/10/2009

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