

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000112970

FILED  
Apr 29, 2009  
Secretary of State

Entity Name: DEBT SOLUTIONS GROUP LLC

## Current Principal Place of Business:

601 HERITAGE DRIVE  
SUITE 209  
JUPITER, FL 33458 US

## New Principal Place of Business:

## Current Mailing Address:

601 HERITAGE DRIVE  
SUITE 209  
JUPITER, FL 33458 US

## New Mailing Address:

FEI Number: 74-3239254

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

DEBT SOLUTIONS GROUP LLC  
601 HERITAGE DRIVE  
SUITE 209  
JUPITER, FL 33458 US

## Name and Address of New Registered Agent:

HUMPHREY, KEVIN PRES.  
601 HERITAGE DRIVE  
SUITE 209  
JUPITER, FL 33458 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: KEVIN HUMPHREY

04/29/2009

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete  
Name: HUMPHREY, KEVIN  
Address: 125 OCEAN CAY WAY  
City-St-Zip: LANTANA, FL 33462 US

Title: MGR ( ) Delete  
Name: SMITHERS, CAMILLE T  
Address: 124 RADCLIFFE COURT  
City-St-Zip: JUPITER, FL 33458 US

## ADDITIONS/CHANGES:

Title: PRES (X) Change ( ) Addition  
Name: HUMPHREY, KEVIN  
Address: 125 OCEAN CAY WAY  
City-St-Zip: LANTANA, FL 33462 US

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: KEVIN HUMPHREY

PRES

04/29/2009

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