2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000116659

Address:

City-St-Zip:

Entity Name: DEPUTY DOGS MOBILE, LLC

FILED Feb 07, 2008 Secretary of State

Current Principal Place of Business:		New Principal Place of Business:		
·		New Fillio	cipal Flace of Dusiness.	
15825 WILLO PINES LANE MONTEVERDE, FL 34756				
Current Mailing Address:		New Maili	ing Address:	
PO BOX 560501 MONTEVERDE, FL 34756				
FEI Number: 26-1523030 FEI Number Ap	plied For () FEI No	umber Not Appl	Dicable () Certificate of Status Desired ()	
Name and Address of Current Registe	ered Agent:	Name and	d Address of New Registered Agent:	
SMITH, JAMES R 15825 WILLO PINES LANE MONTEVERDE, FL 34756 US				
The above named entity submits this staring the State of Florida.	ement for the purpose	of changing i	its registered office or registered agent, or both	
SIGNATURE:				
Electronic Signature of	Registered Agent		Date	
MANAGING MEMBERS/MANAGERS:		ADDITIONS/	/CHANGES:	
Title: () Delete Name: Address: City-St-Zip:		Title: Name: Address: City-St-Zip:	MR. () Change (X) Addition SMITH, JAMES R 15825 WILLO PINES LN MONTVERDE, FL 34756	
Title: () Delete		Title:	MRS. () Change (X) Addition	

Address:

15825 WILLO PINES LN

City-St-Zip: MONTVERDE, FL 34756

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: JAMES R. SMITH MR. 02/07/2008