

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000027375

Entity Name: DCX,"LLC"

FILED
Sep 09, 2009
Secretary of State

Current Principal Place of Business:

460 CR 206 W
184490-0000
ST. AUGUSTINE, FL 32082

New Principal Place of Business:

460 SR 206 W
184490-0000
ST. AUGUSTINE, FL 32082

Current Mailing Address:

P.O.BOX 174
ST. AUGUSTINE, FL 32085

New Mailing Address:

FEI Number: 30-0477929 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:

WALLS, WALLACE
280 BUSINESS PARK CIRCLE
409
ST. AUGUSTINE, FL 32095 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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: WALLS, WALLACE
Address: P.O.BOX 174
City-St-Zip: ST.AUGUSTINE, FL 32085

Title: MGMR () Delete
Name: WALLS, WALLACE
Address: P.O.BOX 174
City-St-Zip: ST.AUGUSTINE, FL 32085

Title: MGMR () Delete
Name: BOYER, BARABARA
Address: P.O.BOX 174
City-St-Zip: ST. AUGUSTINE, FL 32085

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGMR (X) Change () Addition
Name: WALLS, BRENDA
Address: P.O.BOX 174
City-St-Zip: ST.AUGUSTINE, FL 32085

Title: MGMR (X) Change () Addition
Name: BOYER, BARBARA
Address: P.O.BOX 174
City-St-Zip: ST. AUGUSTINE, FL 32085

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: BRENDA WALLS

MMBR

09/09/2009

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