

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000049204

Entity Name: WATSON DS TRANS LLC

FILED  
Jan 23, 2009  
Secretary of State

**Current Principal Place of Business:**

4422 LAFAYETTE STREET  
MARIANNA, FL 32446

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 188  
MARIANNA, FL 32447

**New Mailing Address:**

FEI Number: 59-0746235

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

WATSON, PHILIP W  
4433 LAFAYETTE STREET  
MARIANNA, FL 32446 US

**Name and Address of New Registered Agent:**

WATSON, PHILIP W  
4422 LAFAYETTE STREET  
MARIANNA, FL 32446 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:

01/23/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: WATSON DS INC,  
Address: 4433 LAFAYETTE STREET  
City-St-Zip: MARIANNA, FL 32446 US

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: WATSON DS INC,  
Address: 4422 LAFAYETTE STREET  
City-St-Zip: MARIANNA, FL 32446 US

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: PHILIP W WATSON

VP

01/23/2009

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