

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000008336

Entity Name: DC ELITE SERVICES, LLC

**FILED**  
**Apr 30, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

6174 SW 63RD BLVD.  
GAINESVILLE, FL 32608

**New Principal Place of Business:**

**Current Mailing Address:**

6174 SW 63RD BLVD.  
GAINESVILLE, FL 32608

**New Mailing Address:**

FEI Number: 26-4163567

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

STRAPPY, LATROY A  
501 SW 75TH STREET, UNIT F1  
GAINESVILLE, FL 32607 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: MGR  
Name: STRAPPY, NATALLIE G  
Address: 501 SW 75TH STREET, UNIT F1  
City-St-Zip: GAINESVILLE, FL 32607

Title: MGRM  
Name: GEORGE, TOMMIE  
Address: 6174 SW 63RD BLVD.  
City-St-Zip: GAINESVILLE, FL 32608

Title: MGRM  
Name: GEORGE, CHRISTOPHER SR.  
Address: 6606 SW 59TH STREET  
City-St-Zip: GAINESVILLE, FL 32608

I hereby 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: TOMMIE GEORGE

PRES

04/30/2012

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