

# 2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000021481

**FILED**  
**Feb 16, 2010**  
**Secretary of State**

**Entity Name:** DEALER PORTFOLIO SERVICES, LLC

**Current Principal Place of Business:**

100 RIALTO PLACE, STE 751  
MELBOURNE, FL 32901 US

**New Principal Place of Business:**

5205 BABCOCK ST. NE  
SUITE 7  
PALM BAY, FL 32905 US

**Current Mailing Address:**

12111 FAIRWAY ISLE DRIVE  
FORT MYERS, FLORIDA, 33913 US

**New Mailing Address:**

5205 BABCOCK ST. NE  
SUITE 7  
PALM BAY, FL 32905 US

**FEI Number:** 80-0390732

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CONESE, PASQUALE  
12111 FAIRWAY ISLE DRIVE  
FORT MYERS, FL 33913 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: CONESE, PASQUALE  
Address: 12111 FAIRWAY ISLE DRIVE  
City-St-Zip: FORT MYERS, FL 33913 US

Title: MGR  
Name: MURRAY, KAREN  
Address: 384 MICHIGAN AVE  
City-St-Zip: INDIALANTIC, FL 32903 US

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: PASQUALE CONESE

MGR

02/16/2010

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