

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000034925

Entity Name: DBN SOLUTIONS LLC

**FILED**  
**Apr 29, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

5188 BIRCH AVENUE  
SARASOTA, FL 34233

**New Principal Place of Business:**

**Current Mailing Address:**

5188 BIRCH AVENUE  
SARASOTA, FL 34233

**New Mailing Address:**

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ORTIZ, NORA  
5188 BIRCH AVE  
SARASOTA, FL 34233 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: MGRM  
Name: ORTIZ, NORA  
Address: 5188 BIRCH AVE  
City-St-Zip: SARASOTA, FL 34233

Title: MGRM  
Name: KING, BRIANA  
Address: 4015 FORECAST DR  
City-St-Zip: BRANDON, FL 33511

Title: MGRM  
Name: SHARPE, DENISE  
Address: 11303 BLUE SAGE PLACE  
City-St-Zip: LAKEWOOD RANCH, FL 34202

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: NORA ORTIZ

MGM

04/29/2011

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