

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000058452

Entity Name: DC PUMP SERVICES, LLC

**FILED**  
**Jan 05, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

13320 CREEKSIDE LANE  
PORT CHARLOTTE, FL 33953 US

**New Principal Place of Business:**

**Current Mailing Address:**

13320 CREEKSIDE LANE  
PORT CHARLOTTE, FL 33953 US

**New Mailing Address:**

FEI Number: 27-0450655

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CAMPBELL, DOUGLAS  
13320 CREEKSIDE LANE  
UNIT 103  
PORT CHARLOTTE, FL 33953 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: CAMPBELL, DOUGLAS  
Address: 13320 CREEKSIDE LANE  
City-St-Zip: PORT CHARLOTTE, FL 33953 US

Title: MGRM  
Name: KRASNER, JOYCE  
Address: 13320 CREEKSIDE LANE  
City-St-Zip: PORT CHARLOTTE, FL 33953 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: DOUGLAS CAMPBELL

MR.

01/05/2012

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