

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000034095

**FILED**  
**Apr 26, 2012**  
**Secretary of State**

**Entity Name:** DTE BUSINESS SOLUTIONS, LLC

**Current Principal Place of Business:**

517 110TH AVE NORTH  
NAPLES, FL 34108 US

**New Principal Place of Business:**

**Current Mailing Address:**

517 110TH AVE NORTH  
NAPLES, FL 34108 US

**New Mailing Address:**

**FEI Number:** 45-0951759

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BUSINESS FILINGS INCORPORATED  
515 E. PARK AVENUE  
TALLAHASSEE, FL 32301 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:** MELKER, ERIC  
**Address:** 517 110TH AVE NORTH  
**City-St-Zip:** NAPLES, FL 34108 US

**Title:** MGRM  
**Name:** MORRISON, TIM  
**Address:** 16020 ARBOUR VIEW BLVD. APT. #126  
**City-St-Zip:** NAPLES, FL 34110 US

**Title:** MGRM  
**Name:** MEETZE, JAMES D  
**Address:** 4243 COVEY CIR  
**City-St-Zip:** NAPLES, FL 34109 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:** ERIC M MELKER

MGRM

04/26/2012

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