

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000042395

Entity Name: DGS PARTNERS, LLC

**FILED**  
**Apr 11, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

953 COBBLESTONE LN  
TARPON SPRINGS, FL 34688

**New Principal Place of Business:**

**Current Mailing Address:**

953 COBBLESTONE LN  
TARPON SPRINGS, FL 34688

**New Mailing Address:**

FEI Number: 45-1579652

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

SCHMIDT, GARY A  
953 COBBLESTONE LN  
TARPON SPRINGS, FL 34688 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: SCHMIDT, GARY A  
Address: 953 COBBLESTONE LN  
City-St-Zip: TARPON SPRINGS, FL 34688 US

Title: MGRM  
Name: HOWERTON, DEBORA M  
Address: 953 COBBLESTONE LN  
City-St-Zip: TARPON SPRINGS, FL 34688 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: GARY A. SCHMIDT

MGRM

04/11/2012

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