

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M09000004521

Entity Name: DG SHREVEPORT, LLC

**FILED**  
**Apr 11, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

4499 W. IRLO BRONSON MEMORIAL HIGHWAY  
KISSIMMEE, FL 34746

**New Principal Place of Business:**

**Current Mailing Address:**

4499 W. IRLO BRONSON MEMORIAL HIGHWAY  
KISSIMMEE, FL 34746

**New Mailing Address:**

FEI Number: 27-1280015

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ROCKER, WILLIAM  
4499 W. IRLO BRONSON MEMORIAL HIGHWAY  
KISSIMMEE, FL 34746 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: ROCKER, WILLIAM  
Address: 4499 W. IRLO BRONSON MEMORIAL HIGHWAY  
City-St-Zip: KISSIMMEE, FL 34746

Title: MGR  
Name: ROCKER, JEANNIENE  
Address: 4499 W. IRLO BRONSON MEMORIAL HIGHWAY  
City-St-Zip: KISSIMMEE, FL 34746

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: WILLIAM ROCKER

MGR

04/11/2011

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