

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000101770

Entity Name: DSI CONSULTING AND MANAGEMENT, LLC

Current Principal Place of Business:

1722 NW 80TH BLVD
SUITE 10
GAINESVILLE, FL 32606

Current Mailing Address:

PO BOX 12665
GAINESVILLE, FL 32604

FEI Number: 27-1156800

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

JONES, STAFFORD
1722 NW 80TH BLVD
SUITE 10
GAINESVILLE, FL 32606 US

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

Authorized Person(s) Detail :

Title MGRM
Name JONES, STAFFORD
Address PO BOX 12665
City-State-Zip: GAINESVILLE FL 32604

I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: STAFFORD JONES

MGRM

04/26/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date