

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Feb 26, 2008 8:00 am**  
**Secretary of State**

02-26-2008 90009 001 \*\*\*150.00

DOCUMENT # F03000000179

1. Entity Name

DH & ASSOCIATES, INC.



Principal Place of Business

103 RHODODENDRON DR.  
HIGHLANDS NC 28741

Mailing Address

103 RHODODENDRON DR.  
HIGHLANDS NC 28741



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

58-1782596

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

1st MOORE

CR2E034 (10/07)

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HOLDER, DOUGLAS JR.  
7964 MEADOW RUSH LOOP  
SARASOTA FL 34238

*address  
change*

Name

*Holder, Douglas Jr*

Street Address (P.O. Box Number is Not Acceptable)

*580 MacKewan Dr.*

City

*Osprey, FL*

Zip Code

*34229*

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

*Douglas A. Holder Jr*

Signature, typed or printed name of registered agent and title, if applicable.

(NOTE: Registered Agent signature required when reinstating)

*2-13-08*

DATE

**FILE NOW!!! FEE IS \$150.00**

**After May 1, 2008 Fee Will Be \$550.00**

**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PCD ☐ Delete  
NAME HOLDER, DOUGLAS  
STREET ADDRESS 136 OSPREY PT DR  
CITY-ST-ZIP OSPREY FL 34229

TITLE VD ☐ Delete  
NAME HOLDER, DOUGLAS JR.  
STREET ADDRESS 7964 MEADOW RUSH LOOP  
CITY-ST-ZIP SARASOTA FL 34238

TITLE STD ☐ Delete  
NAME HOLDER, CAROLYN ANN  
STREET ADDRESS 136 OSPREY PT DR  
CITY-ST-ZIP OSPREY FL 34229

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition  
NAME *VP Holder, Douglas Jr*  
STREET ADDRESS *580 MacKewan Dr*  
CITY-ST-ZIP *Osprey, FL 34229*

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*Douglas A. Holder Jr*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*Douglas A. Holder*

*2-13-08*

Date

Daytime Phone #