

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000001802

Entity Name: DIGITAL RESEARCH, INC.

FILED
Aug 25, 2008
Secretary of State

Current Principal Place of Business:

201 LAFAYETTE CENTER
KENNEBUNK, ME 04043

New Principal Place of Business:

Current Mailing Address:

201 LAFAYETTE CENTER
KENNEBUNK, ME 04043

New Mailing Address:

FEI Number: 01-0501404

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MICHAUD, JOHN
504 CENTRAL PARK DR
SANFORD, FL 32771 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CP () Delete
Name: DOMINE, ROBERT M
Address: 17 TIDAL SHORE DR
City-St-Zip: KENNEBUNKPORT, ME 04046

Title: T () Delete
Name: DOMINE, CYNTHIA
Address: 17 TIDAL SHORE DR
City-St-Zip: KENNEBUNKPORT, ME 04046

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MICHELLE ALDRIDGE

DIR

08/25/2008

Electronic Signature of Signing Officer or Director

_____ Date