

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000072536

**FILED**  
**Jan 19, 2009**  
**Secretary of State**

**Entity Name:** DNM ENGINEERING & ASSOCIATES, INC.

**Current Principal Place of Business:**

2603 S.E. 17TH STREET  
SUITE C  
OCALA, FL 34471 US

**Current Mailing Address:**

P.O. BOX 42  
OCALA, FL 34478 US

**New Principal Place of Business:**

2201 S.E. 30TH AVENUE  
SUITE 201  
OCALA, FL 34471 US

**New Mailing Address:**

**FEI Number:** 05-0576010      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

VANDEURSEN, DOUGLAS A  
165 SOUTHEAST 32ND PLACE  
OCALA, FL 34471 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

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: P,TR ( ) Delete  
Name: VANDEURSEN, DOUGLAS A  
Address: 165 SOUTHEAST 32ND PLACE  
City-St-Zip: Ocala, FL 34471 US

Title: VP,S ( ) Delete  
Name: BLACKMAN, WALTER M  
Address: 5959 AVENUE B  
City-St-Zip: MCINTOSH, FL 32664 US

**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: WALTER M. BLACKMAN

VP,S

01/19/2009

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date