

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000141017

FILED
Mar 11, 2012
Secretary of State

Entity Name: DAT WOODWORKING PLACE, INC

Current Principal Place of Business:

4015 PINES INDUSTRIAL AVE
UNIT H
ROCKLEDGE, FL 32955

New Principal Place of Business:

4015 PINES INDUSTRIAL AVE
UNIT E
ROCKLEDGE, FL 32955

Current Mailing Address:

4015 PINES INDUSTRIAL AVE
UNIT H
ROCKLEDGE, FL 32955

New Mailing Address:

4015 PINES INDUSTRIAL AVE
UNIT E
ROCKLEDGE, FL 32955

FEI Number: 20-0686973

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOFFMAN, DALE D
848 PINEVIEW AVE
ROCKLEDGE, FL 32955 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

OFFICERS AND DIRECTORS:

Title: P
Name: HOFFMAN, DALE D
Address: 848 PINEVIEW AVE
City-St-Zip: ROCKLEDGE, FL 32955

Title: S
Name: HOFFMAN, PATRICIA F
Address: 848 PINEVIEW AVE
City-St-Zip: ROCKLEDGE, FL 32955

Title: T
Name: HOFFMAN, DALE D
Address: 848 PINEVIEW AVE
City-St-Zip: ROCKLEDGE, FL 32955

Title: VP
Name: HOFFMAN, MICHAEL R
Address: 88 HAMILTON DRIVE
City-St-Zip: MERRITT ISLAND, FL 32952

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 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 all other like empowered.

SIGNATURE: DALE D. HOFFMAN

P

03/11/2012

Electronic Signature of Signing Officer or Director

_____ Date