

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000090276

FILED
Apr 11, 2006
Secretary of State

Entity Name: DEXTER FINANCIAL CORPORATION

Current Principal Place of Business:

3677 LONGMEADOW DRIVE
SARASOTA, FL 34235

New Principal Place of Business:

3677 LONGMEADOW DRIVE
SARASOTA, FL 34235 US

Current Mailing Address:

3677 LONGMEADOW DRIVE
SARASOTA, FL 34235

New Mailing Address:

3677 LONGMEADOW DRIVE
SARASOTA, FL 34235 US

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BUSINESS FILINGS INCORPORATED
1203 GOVERNORS SQUARE BLVD.
SUITE 101
TALLAHASSEE, FL 323012960 US

Name and Address of New Registered Agent:

DENTNESS FILINGS INCORPORATED
1203 GOVERNORS SQUARE BLVD.
SUITE 101
TALLAHASSEE, FL 323012960 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: BUSINESS FILINGS INCORPORATED
Electronic Signature of Registered Agent

04/11/2006
Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: HORROW, ROBERT
Address: 3677 LONGMEADOW DRIVE
City-St-Zip: SARASOTA, FL 34235

Title: V () Delete
Name: HORROW, ROBERT
Address: 3677 LONGMEADOW DRIVE
City-St-Zip: SARASOTA, FL 34235

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: HORROW, ROBERT
Address: 3677 LONGMEADOW DRIVE
City-St-Zip: SARASOTA, FL 34235

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

Title: D () Change (X) Addition
Name: HORROW, ROBERT
Address: 3677 LONGMEADOW DRIVE
City-St-Zip: SARASOTA, FL 34235

Title: S () Change (X) Addition
Name: HORROW, DEXTER
Address: 3677 LONGMEADOW DRIVE
City-St-Zip: SARASOTA, FL 34235

I hereby certify that the information supplied with this filing does not qualify for the 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: ROBERT HORROW
Electronic Signature of Signing Officer or Director

PRES

04/11/2006
Date