

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000102381

FILED
Apr 16, 2012
Secretary of State

Entity Name: DBSB 2, INC.

Current Principal Place of Business:

1551 ATLANTIC BLVD
STE 300
JACKSONVILLE, FL 32207

New Principal Place of Business:

Current Mailing Address:

PO BOX 47050
JACKSONVILLE, FL 322477050

New Mailing Address:

FEI Number: 59-3481117

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DEMETREE, J.C. JR.
1551 ATLANTIC BLVD
SUITE 300
JACKSONVILLE, FL 32207 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: PT
Name: DEMETREE, JR., J.C.
Address: 1551 ATLANTIC BLVD STE 300
City-St-Zip: JACKSONVILLE, FL 32207

Title: VSAT
Name: DEMETREE, MARK C
Address: 1551 ATLANTIC BLVD STE 300
City-St-Zip: JACKSONVILLE, FL 32207

Title: VAS
Name: DEMETREE, CHRISTOPHER C
Address: 1551 ATLANTIC BLVD STE 300
City-St-Zip: JACKSONVILLE, FL 32207

Title: VAS
Name: DUNN, M. HARRIS
Address: 1551 ATLANTIC BLVD STE 300
City-St-Zip: JACKSONVILLE, FL 32207

Title: CEOC
Name: DEMETREE, JACK C SR
Address: 1551 ATLANTIC BLVD STE 300
City-St-Zip: JACKSONVILLE, FL 32207

Title: VSAT
Name: DEMETREE, MARK C
Address: 1551 ATLANTIC BLVD STE 300
City-St-Zip: JACKSONVILLE, FL 32207

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: J.C. DEMETREE, JR.

PT

04/16/2012

Electronic Signature of Signing Officer or Director

_____ Date