

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V43185

FILED
Apr 24, 2006
Secretary of State

Entity Name: DEARBORN ELECTRONICS, INC.

Current Principal Place of Business:

1221 N HWY 17-92
LONGWOOD, FL 32750

New Principal Place of Business:

Current Mailing Address:

200 S ORANGE AVE
SUITE 2300
ORLANDO, FL 328013432 US

New Mailing Address:

FEI Number: 59-3129126

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

A.G.C. CO
200 S ORANGE AVE
SUITE 2300
ORLANDO, FL 32801 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: DPT () Delete
Name: SHERRY, JAMES P.,
Address: 553 SOUTH LONGVIEW PLACE
City-St-Zip: LONGWOOD, FL 32750

Title: D () Delete
Name: BROWNING, PERRY W.,
Address: 81 ABBOTT AVE
City-St-Zip: BARRE, VT 05641

Title: DVP () Delete
Name: ROTOLO, FREDRICK T
Address: 1143 EAST PAGE DRIVE
City-St-Zip: DELTONA, FL 32725

Title: DVP () Delete
Name: CARTER, MARK A
Address: 2932 BOWER ROAD
City-St-Zip: WINTER PARK, FL 32792

Title: D () Delete
Name: SHERRY, DIANA
Address: 553 SOUTH LONGVIEW PLACE
City-St-Zip: LONGWOOD, FL 32750

Title: D () Delete
Name: BROWNING, NANCY
Address: 81 ABBOTT AVENUE
City-St-Zip: BARRE, VT 05641

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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 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: JAMES P. SHERRY

P

04/24/2006

Electronic Signature of Signing Officer or Director

_____ Date