

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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FILED
Apr 26, 2006 8:00 am
Secretary of State

04-14-2006 90142 013 ****61.25

DOCUMENT # N05000007703 1. Entity Name DESOTO DISASTER RECOVERY, INC.					
Principal Place of Business 200 W OAK ST ARCADIA, FL 34266			Mailing Address 200 W OAK ST ARCADIA, FL 34266		
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address PO BOX 3345 Suite, Apt. #, etc.			
City & State		City & State ARCADIA, FL.		4. FEI Number 20-3352682	
Zip 34265		Country		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent LAUBHAN, DAVID 200 W OAK ST ARCADIA, FL 34266				7. Name and Address of New Registered Agent Name LAND, TED REV. Street Address (P.O. Box Number is Not Acceptable) PO BOX 3345 200 W. OAK ST. ARCADIA, FL. 34265 34266 City FL Zip Code	
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE <u>Ted W. Land</u> <u>Ted W. Land</u> <u>4/10/06</u> Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing) DATE					
Filing Fee is \$81.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees		Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LAUBHAN, DAVID 200 W OAK ST ARCADIA, FL 34266	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SEC/TREAS. SANDERS, MELISSA 904 PARK VIEW RD. ARCADIA, FL. 34266	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LAND, TED REV 200 W OAK ST ARCADIA, FL 34266	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRESIDENT LAND, TED REV. PO BOX 3345 200 W. OAK ST. ARCADIA, FL 34265 34266	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HARRIS, DAVID REV 200 W OAK ST ARCADIA, FL 34266	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MATON, MARIA 1210 E. OAK ST. ARCADIA, FL. 34266	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SPANGLER, COLLEEN 1269 S.E. Tongelo Dr. ARCADIA, FL. 34266	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP MORGAN, SAMUEL 3048 S.E. BROWN RD ARCADIA, FL. 34266	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HEITMAN, EUGENE SR. 5162 N.W. OAK HILL AVE. ARCADIA FL. 34266	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HEITMAN, EUGENE SR. 5162 N.W. OAK HILL AVE. ARCADIA FL. 34266	☐ Change ☒ Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE <u>Ted W. Land</u> <u>4/10/06</u> <u>863/444-4434</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone					