2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# 206236

Entity Name: DNS ENTERPRISES, INC.

FILED Jul 11, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

435 NE 63RD ST OCALA, FL 34479 US

Current Mailing Address: New Mailing Address:

435 NE 63RD ST OCALA, FL 34479 US

FEI Number: 59-0822917 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

THURMAN, SAM D
435 NE 63RD ST
OCALA, FL 34479 US

THURMAN, DONNA L
435 NE 63RD ST
OCALA, FL 34479 US

OCALA, FL 34479 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: DONNA L THURMAN 07/11/2007

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition Name: THURMAN, SAM D. JR., Name: THURMAN, DONNA L,

 Address:
 435 NE 63RD ST
 Address:
 435 NE 63RD ST

 City-St-Zip:
 OCALA, FL 34479
 City-St-Zip:
 OCALA, FL 34479

Title: TD () Delete Title: TD (X) Change () Addition Name: THURMAN, DONNA L., Name: THURMAN, BRADLEY E.,

Address: 435 NE 63RD ST Address: 435 NE 63RD ST City-St-Zip: OCALA, FL 34479 City-St-Zip: OCALA, FL 34479

I hereby certify that the information supplied with this filing does not qualify 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: DONNA L THURMAN PRES 07/11/2007