

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 441423

**FILED**  
**Jan 29, 2006**  
**Secretary of State**

**Entity Name:** D M P ASSOCIATES, INC.

**Current Principal Place of Business:**

9220 BONITA BEACH ROAD  
SUITE 200  
NAPLES, FL 34135 US

**New Principal Place of Business:**

9220 BONITA BEACH ROAD  
SUITE 200  
BONITA SPRINGS, FL 34135 US

**Current Mailing Address:**

9220 BONITA BEACH ROAD  
SUITE 200  
NAPLES, FL 34135 US

**New Mailing Address:**

9220 BONITA BEACH ROAD  
SUITE 200  
BONITA SPRINGS, FL 34135 US

**FEI Number:** 59-1496457

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

PHILLIPS, D M  
9220 BONITA BEACH ROAD  
SUITE 200  
NAPLES, FL 34135 US

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

PHILLIPS, D M  
9220 BONITA BEACH ROAD  
SUITE 200  
BONITA SPRINGS, FL 34135 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: \_\_\_\_\_

01/29/2006

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: PT ( ) Delete  
Name: PHILLIPS, D M  
Address: 9220 BONITA BEACH ROAD #200  
City-St-Zip: NAPLES, FL 34135 US

Title: VS ( ) Delete  
Name: PHILLIPS, B K  
Address: 9220 BONITA BEACH ROAD #200  
City-St-Zip: NAPLES, FL 34135 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PT (X) Change ( ) Addition  
Name: PHILLIPS, D M  
Address: 9220 BONITA BEACH ROAD - SUITE 200  
City-St-Zip: BONITA SPRINGS, FL 34135 US

Title: VS (X) Change ( ) Addition  
Name: PHILLIPS, B K  
Address: 9220 BONITA BEACH ROAD - SUITE 200  
City-St-Zip: BONITA SPRINGS, FL 34135 US

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: D. M. PHILLIPS

PRES

01/29/2006

Electronic Signature of Signing Officer or Director

Date