2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 497975

Entity Name: DAVID BOLAND, INC.

FILED Jan 12, 2009 Secretary of State

509 SOUTH PALM AVE
TITUSVILLE, FL 32796

509 SOUTH PALM AVE
TITUSVILLE, FL 32796 US

Current Mailing Address: New Mailing Address:

POST OFFICE BOX 1870
TITUSVILLE, FL 32781
POST OFFICE BOX 1870
TITUSVILLE, FL 32781 US

FEI Number: 59-1651179 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:

BOLAND, DAVID 6865 RIVEREDGE DR TITUSVILLE, FL 32780 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:

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: P (X) Change () Addition Name: BOLAND, DAVID Name: BOLAND, DAVID

Address: 6865 RIVEREDGE DR Address: 6865 RIVEREDGE DR City-St-Zip: TITUSVILLE, FL 32780 City-St-Zip: TITUSVILLE, FL 32780 US

Title: VP (X) Delete Title: () Change () Addition
Name: BALES ALLEN L Name:

Name: BALES, ALLEN L Name:
Address: 2014 SCHULTE AVENUE Address:
City-St-Zip: DAYTONA BEACH, FL 32118 City-St-Zip:

Title: VP () Delete Title: VP (X) Change () Addition Name: LUDINGTON, TOMMY L Name: LUDINGTON, TOMMY L

Address: 1672 RICE AVENUE Address: 1672 RICE AVENUE
City-St-Zip: TITUSVILLE, FL 32796 City-St-Zip: TITUSVILLE, FL 32796 US

Title: S () Delete Title: S (X) Change () Addition

 Name:
 HOLMES, TERRI L
 Name:
 HOLMES, TERRI L

 Address:
 P.O. BOX 3042
 Address:
 P.O. BOX 3042

City-St-Zip: TITUSVILLE, FL 327813042 City-St-Zip: TITUSVILLE, FL 327813042 US

Title: TR () Delete Title: T (X) Change () Addition

 Name:
 GEDDES, ANTONIA G
 Name:
 GEDDES, ANTONIA G

 Address:
 4515 GREENHILL ST
 Address:
 4515 GREENHILL ST

 City-St-Zip:
 COCOA, FL 32927
 City-St-Zip:
 COCOA, FL 32927 US

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: ANTONIA G. GEDDES T 01/12/2009