

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 653008

FILED
Apr 28, 2005
Secretary of State

Entity Name: DAVE DUMKE CONSTRUCTION, INC.

Current Principal Place of Business:

2148 VILLA WAY
NEW SMYRNA BEACH, FL 32169 US

New Principal Place of Business:

Current Mailing Address:

2148 VILLA WAY
NEW SMYRNA BEACH, FL 32169 US

New Mailing Address:

FEI Number: 59-1967300 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

DAVID A DUMKE
2148 VILLA WAY
NEW SMYRNA BEACH, FL 32169 US

Name and Address of New Registered Agent:

DUMKE, DAVID A
2148 VILLA WAY
NEW SMYRNA BEACH, FL 32169 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: DAVID A. DUMKE 04/28/2005
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PST () Delete
Name: DUMKE, DAVID A,
Address: 2148 VILLA WAY
City-St-Zip: NEW SMYRNA BEACH, FL 32169 US

Title: VP () Delete
Name: DUMKE, LYDIA
Address: 2148 VILLA WAY
City-St-Zip: NEW SMYRNA BEACH, FL 32169 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 Section 119.07(3)(i), 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: DAVID A. DUMKE PST 04/28/2005
Electronic Signature of Signing Officer or Director Date