## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 674958** 

Entity Name: DP TECHNOLOGIES, INC.

FILED Jan 12, 2006 Secretary of State

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

P.O. BOX 36386 435 BELLE CHASSE DR PENSACOLA, FL 32506

Current Mailing Address: New Mailing Address:

P.O. BOX 36386 435 BELLE CHASSE DR PENSACOLA, FL 32506

FEI Number: 59-2010475 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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

DAVID L. POSTON POSTON, DAVID L
435 BELLE CHASSE DR.
PENSACOLA, FL 32506 US PENSACOLA, FL 32506 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 L. POSTON 01/12/2006

Electronic Signature of Registered Agent Date

City-St-Zip:

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

PENSACOLA, FL

City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

PENSACOLA, FL 32506 US

Title: PV ( ) Delete Title: PV (X) Change ( ) Addition
Name: POSTON, DAVID L., Name: POSTON, DAVID L

Address: 435 BELLE CHASSE DR

 Address:
 435 BELLE CHASSE DR.
 Address:
 435 BELLE CHASSE DR.

 City-St-Zip:
 PENSACOLA, FL
 00000,
 City-St-Zip:
 PENSACOLA,, FL
 32506 US

Title: ST () Delete Title: ST (X) Change () Addition Name: POSTON, ALICIA M., Name: POSTON, ALICIA M. Address: 435 BELLE CHASSE DR. 435 BELLE CHASSE DR.

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: ALICIA M. POSTON SECT 01/12/2006