


**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 22, 2008 08:00 AM
Secretary of State

DOCUMENT # F01000004274 1. Entity Name DWDB, INC.	
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Principal Place of Business 78 SOUTH CODY ROAD MOBILE, AL 36608	Mailing Address 78 SOUTH CODY ROAD MOBILE, AL 36608
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DO NOT WRITE IN THIS SPACE

01112008 No Chg-P CR2E034 (11/05)

4. FEI Number 63-1242128	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BREWER, DAN
4100 PIEDMONT RD
PENSACOLA, FL 32503

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating)

0000000790874
01/23/08-80052-006 150.00

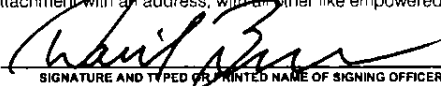
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PCD BREWER, DANIEL 4100 PIEDMONT RD. PENSACOLA, FL 32503
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V BREWER, LISA C 4100 PIEDMONT RD. PENSACOLA, FL 32503
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with another like empowered.

SIGNATURE:  1-15-08 850-469-9799

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #