

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000004995

FILED
Jun 29, 2008
Secretary of State

Entity Name: DEMORGAN INDUSTRIES CORPORATION

Current Principal Place of Business:

120 FAUN RD
ST. AUGUSTINE, FL 32086

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 2236
ST. AUGUSTINE, FL 320852236

New Mailing Address:

FEI Number: 06-1431966

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CP () Delete
Name: SAGHIR, JIM A
Address: 120 FAUN ROAD
City-St-Zip: ST. AUGUSTINE, FL 32086

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP () Change (X) Addition
Name: SAGHIR, KAY L
Address: 120 FAUN ROAD
City-St-Zip: ST. AUGUSTINE, FL 32086

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: JIM SAGHIR

CP

06/29/2008

Electronic Signature of Signing Officer or Director

Date