2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 16, 2009
Secretary of State

DOCUMENT# F03000005896

Entity Name: DUPONT YARD, INC.

Current Principal Place of Business:

45 LINNIE STREET
HOMERVILLE, GA 31634

New Principal Place of Business:

Current Mailing Address:

BOX 208
HOMERVILLE, GA 31634

New Mailing Address:

FEI Number: 58-1979422 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CFRA, LLC
CORPORATE CENTER THREE AT INT'L PLAZA
4221 W. BOY SCOUT BLVD, 10TH FLOOR
TAMPA, FL 336075736 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: P ( ) Delete
Name: CONNER, STEVE W
Address: 45 LINNIE STREET
City-St-Zip: HOMERVILLE, GA 31634

Title: S ( ) Delete
Name: MORGAN, BARBARA
Address: 941 WAYCROSS HIGHWAY
City-St-Zip: HOMERVILLE, GA 31634

Title: T ( ) Delete
Name: SIMMONS, PAT
Address: HIGHWAY 84, MAIN STREET
City-St-Zip: DUPONT, GA 31630

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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 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: STEVE W. CONNER PRES 06/16/2009

Electronic Signature of Signing Officer or Director — Date