2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 26, 2008
Secretary of State

DOCUMENT# F98000002543

Entity Name: DSI DISTRIBUTING, INC.

Current Principal Place of Business:

11338 AURORA AVE.
DES MOINES, IA 50322

New Principal Place of Business:

Current Mailing Address:

11338 AURORA AVE.
DES MOINES, IA 50322

New Mailing Address:

FEI Number: 35-2034369 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HARBER, CLIFF
6301 HAZELTINE NATIONAL DR.
SUITE 101
ORLANDO, FL 32822 US

Name and Address of New Registered Agent:

CROW, DAVID
6301 HAZELTINE NATIONAL DR.
SUITE 101
ORLANDO, FL 32822 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 CROW 03/26/2008
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: CEOD ( ) Delete
Name: ROBISON, DAVID
Address: 11338 AURORA AVE
City-St-Zip: URBANDALE, IA 50322

Title: CD ( ) Delete
Name: ROBISON, CHARLES A
Address: 11338 AURORA AVE
City-St-Zip: URBANDALE, IA 50322

Title: PD ( ) Delete
Name: ROBISON, DOUG
Address: 10425 PLANO ROAD SUITE 200
City-St-Zip: DALLAS, TX 75238

Title: CFOS ( ) Delete
Name: ANDERSON, CRAIG
Address: 11338 AURORA AVE
City-St-Zip: URBANDALE, IA 50322

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:

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: CRAIG ANDERSON CFO 03/26/2008
Electronic Signature of Signing Officer or Director Date