2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # G44862

1. Entity Name DITTMER PROPERTIES, INC.



FILED Feb 19, 2008 08:00 AN Secretary of State

Principal Place of Business

1006 SHEPARD ROAD WINTER SPRINGS, FL 32708 Mailing Address

1006 SHEPARD ROAD WINTER SPRINGS, FL 32708



DO NOT WRITE IN THIS SPACE

01292008 No Chg-P CR2E034 (11/05)

4. FEI Number 59-2322757

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional

6. Name and Address of Current Registered Agent

DITTMER, WALT JR. 1006 SHEPARD RD WINTER SPRINGS, FL. 32708

DO NOT WRITE IN THIS SPACE

				114 1	THIO OF AOL
	named entity submits this statement for the pions of registered agent.	urpose of changing its regi	[istered office or r	egistered agent, or bot	h, in the State of Florida. I am familiar with, and accept
SIGNATURE	Signature, typed or printed name of registered agent and title I	f applicable (NOTE: Reg	gistered Agent signature	e required when reinstating)	DATE
FIL After M	E NOWIII FEE IS \$150.00 ay 1, 2008 Fee will be \$550.00	Election Campaign F Trust Fund Contribut		\$5.00 May Be Added to Fees	C"".
10.	OFFICERS AND DIREC	CTORS			100
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD DITTMER, WALTER, JR. 1006 SHEPARD ROAD WINTER SPRINGS, FL 32708				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S CALLAN, KAREN E 110 N SUNSET DR CASSELBERRY, FL 32707				000000831628 02/27/08-80027-010 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP CALLAN, DANA S 110 N SUNSET DR CASSELBERRY, FL 32707			DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPZ SMITH, SHELLI D. 1612 WHITE DOVE DRIVE WINTER SPRINGS, FL 32708			IN 7	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	The state of the s			ap _i , , sp. j	and the same of th

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 all address, with all affer like empowered.

SIGNATURE: .

NAME ... STREET ADDRESS CITY-ST-ZiP = 1

IGNATURE AND TWED OR PRINTED NAME OF BIGNING OF MER OR DIRECTO

2-14.08 407-699-1755

Daytime Phone #