2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G96314

Entity Name: DAHAPA, INC.

FILED Mar 04, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

4513 ALTA VISTA DR PUNTA GORDA, FL 33950

Current Mailing Address: New Mailing Address:

4513 ALTA VISTA DR PUNTA GORDA, FL 33950

FEI Number: 59-2398770 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

COLEMAN, JOHN CHARLES 2300 MCGREGOR BOULEVARD FORT MYERS, FL 33901 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:

City-St-Zip:

Title:

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition

 Title:
 PTD
 () Delete

 Name:
 DENTY, RALPH S.,

 Address:
 4513 ALTA VISTA DR.

 City-St-Zip:
 PUNTA GORDA, FL

Title: DVS () Delete
Name: DENTY, ELLA J,
Address: 4513 ALTA VISTA DR

PUNTA GORDA, FL

Name: DENTY, RALPH S.,
Address: 4513 ALTA VISTA DR.
City-St-Zip: PUNTA GORDA, FL 33950

Title: DVS (X) Change () Addition

Name: DENTY, ELLA J,
Address: 4513 ALTA VISTA DR
City-St-Zip: PUNTA GORDA, FL 33950

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: ELLA J. DENTY DVS 03/04/2009