


# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 31, 2008 8:00 am**  
**Secretary of State**

01-31-2008 90015 008 \*\*\*150.00

<b>DOCUMENT # H14485</b> 1. Entity Name D & R PROSPECTING, INC.	
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Principal Place of Business % DONALD PLANT 3590 S.E. GULL LANE STUART, FL 34997	Mailing Address % DONALD PLANT 3590 S.E. GULL LANE STUART, FL 34997
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2. Principal Place of Business - No P.O. Box # 3590 SE Gull Lane	3. Mailing Address 3590 SE Gull Lane
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01142008 Chg-P CR2E034 (12/06)

City & State STUART FL	City & State STUART FL
Zip 34997	Zip 34997
Country US	Country US

4. FEI Number 59-2464486	<input checked="" type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent PLANT, DONALD 3590 S.E. GULL LANE STUART, FL 34997	
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7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	
FL	Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.	
SIGNATURE <u>Donald Plant</u> <small>Signature, typed or printed name of registered agent and title if applicable</small>	DATE <u>1-15-08</u> <u>renewal</u> <small>(NOTE: Registered Agent signature required when reinstating)</small>

<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2008 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P PLANT, DONALD 3590 S.E. GULL LANE STUART, FL <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T PLANT, ROBERTA 3590 S.E. GULL LANE STUART, FL <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 an address, with all other like empowered.	
SIGNATURE: <u>Donald Plant - Donald Plant</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	DATE <u>1-15-08</u> <u>772-285-452</u> <small>Date Daytime Phone #</small>