

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H21784

Entity Name: DAVID D. REED, INC.

FILED
Feb 28, 2009
Secretary of State

Current Principal Place of Business:

5801 15TH AVENUE SOUTH
GULFPORT, FL 33707

New Principal Place of Business:

Current Mailing Address:

5801 15TH AVENUE SOUTH
GULFPORT, FL 33707

New Mailing Address:

FEI Number: 59-2447721 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REED, DAVID D
5801 15TH AVENUE SOUTH
GULFPORT, FL 33707 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PTD () Delete
Name: REED, DAVID D.,
Address: 5801 15TH AVE. S.
City-St-Zip: GULFORT, FL 33707

Title: SD () Delete
Name: REED, HELEN M
Address: 5801 15TH AVE. SO.
City-St-Zip: GULF PORT, FL 33707

Title: V () Delete
Name: AUGUSTINE, MARK E
Address: 5066 54TH ST N
City-St-Zip: KENNETH CITY, FL 33703

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change () Addition
Name: REED, DAVID D
Address: 5801 15TH AVENUE SOUTH
City-St-Zip: GULFORT, FL 33707

Title: SD (X) Change () Addition
Name: REED, HELEN M
Address: 5801 15TH AVENUE SOUTH.
City-St-Zip: GULFPORT, FL 33707

Title: V (X) Change () Addition
Name: AUGUSTINE, MARK E
Address: 5066 54TH STREET NORTH
City-St-Zip: KENNETH CITY, FL 33703

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: DAVID D. REED

Electronic Signature of Signing Officer or Director

PRES

02/28/2009

Date