2008 FOR PROFIT CORPORATION

FILED May 06, 2008 8:00 am

ANNUAL REPORT							Secretary of State					
1. Entity Name	MENT # H24815 DODGE, INC.							05-06-2008 9	-			
Principal Place of Business % ROBERT W. GEYER 7745 S TAMIAMI TR SARASOTA, FL 34231 US			Mailing Address % ROBERT W. GEYER 1800 BAY ROAD SARASOTA, FL 34239									
2. Principal Place of Business - No P.O. Box #			3. Mailing Address									
Suite, Apt. #, etc.			Suite, Apt. #, etc.			0409	2008	Chg-P	CR2E03	4 (12/06)		
City & State			City & State			4. FEI		er 80875			plied For Applicable	
Zip	Country		Zip Coun		try	5. Certificate of Status Desired			\$8.75 Additional Fee Required			
	6. Name and Address of Cu	rrent Regis	stered Agent			7. Na:	ne and	Address of New Re	gistered A	gent		
MCLAUGHLIN, THOMAS J					Name							
200 S. ORANGE AVE. SARASOTA, FL 34236					Street Addres	dress (P.O. Box Number is Not Acceptable)						
ų*					City					Zip Code		
;					City	City FL Zip Code						
	named entity submits this statem ions of registered agent.	ent for the	purpose of changing its	register	ed office or regis	stered agen	t, or bo	oth, in the State of Flor	rida. I am fa	amiliar with,	and accept	
SIGNATURE_	Signature, typed or printed name of registered	I agent and title	if applicable. (NOTE	E. Registere	d Agent signature requ	uired when reins	(aling)	<u></u>	DATE			
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FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00						\$5.00 May Added to Fe						
10.	OFFICERS	AND DIRE	CTORS	11.		ADD	TIONS	/CHANGES TO OFFI	CERS AND	DIRECTORS	S IN 11	
TITLE NAME	D OSBORNE, DONALD E		☐ Delete	TITLE	I .	S		. Geyer	<u> </u>	Change	Addition	
STREET ADDRESS CITY-ST-ZIP	7745 S TAMIAMI TR SARASOTA, FL				ET ADDRESS -ST-ZIP	1800	Вау	Rd.				
TITLE NAME	PDT GEYER, ROBERT W.		☐ Delete	TITLE NAM		Saras	ca,	FL 34239		Change	☐ Addition	
STREET ADDRESS CITY-ST-ZIP	1800 BAY RD SARASOTA, FL 34239				ET ADDRESS -ST-ZIP							
TITLE NAME	AS OZBURN, DOROTHY C.		☐ Delete	TITL:	I			• • • • • • • • • • • • • • • • • • • •		☐ Change	☐ Addition	
STREET ADDRESS CITY-ST-ZIP	2530 DICK WILSON DRIVE SARASOTA, FL 34240				-ST-ZIP							
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete		1					☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete	NAM STRE	E		•	,,,, , , , , , , , , , , , , , , , , ,		Change	Addition	
TITLE NAME			☐ Delete	TITL	1			. <u> </u>		Change	☐ 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.

CITY-ST-ZIP

CITY-ST-ZIP

SIGNATURE: Robert W. Geyer, Pres. 4/8/2008
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR 941-366-7800