

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H56266

Entity Name: D. N. J., INC.

FILED
Apr 08, 2010
Secretary of State

Current Principal Place of Business:

% JOSEPH N. GIOVENCO
4527 AZEELE
TAMPA, FL 33609

New Principal Place of Business:

Current Mailing Address:

% JOSEPH N. GIOVENCO
4527 AZEELE
TAMPA, FL 33609

New Mailing Address:

FEI Number: 59-2595142

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GIOVENCO, JOSEPH N.
4527 AZEELE
TAMPA, FL 33609 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: PD
Name: GIOVENCO, JOSEPH N.
Address: 4527 AZEELE STREET
City-St-Zip: TAMPA, FL 33609 US

Title: D
Name: WILLIAMS, DINA G.
Address: 1095 DRUID LAKE
City-St-Zip: DECATUR, GA

Title: D
Name: GIOVENCO, JOANNE M.
Address: 2109 BAYSHORE BLVD, #411
City-St-Zip: TAMPA, FL

Title: D
Name: GIOVENCO, VIOLET
Address: 4527 AZEELE
City-St-Zip: TAMPA, FL

Title: D
Name: GORELICK, ANNETTE
Address: 8910 NESBIT LAKES DR
City-St-Zip: ALPHARETTA, GA

Title: D
Name: BILLINGS, CELIA
Address: 113 WINDSONG CT
City-St-Zip: GASTONIA, NC

I hereby 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 all other like empowered.

SIGNATURE: J. NORMAN GIOVENCO

MR.

04/08/2010

Electronic Signature of Signing Officer or Director

Date