

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K15320

FILED  
Apr 07, 2009  
Secretary of State

Entity Name: D&S DISCOUNT HOME CENTERS, INC.

**Current Principal Place of Business:**

4206 N ORANGE BLOSSOM TRAIL  
ORLANDO, FL 32804

**New Principal Place of Business:**

**Current Mailing Address:**

4206 N ORANGE BLOSSOM TRAIL  
ORLANDO, FL 32804

**New Mailing Address:**

FEI Number: 59-2873424      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

ENGLEHARDT, JOHN C.  
1524 E. LIVINGSTON ST  
ORLANDO, FL 32808    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: ST ( ) Delete  
Name: SLAPA, EDWARD,  
Address: 1914 LOST SPRING CIR  
City-St-Zip: LONGWOOD, FL 32779

Title: P ( ) Delete  
Name: DAUPHNEY, PETER,  
Address: 1572 MARGERITE CRESENT  
City-St-Zip: APOPKA, FL 32703

Title: VP ( ) Delete  
Name: SLAPA, JAMES  
Address: 1000 HANFORD DRIVE  
City-St-Zip: DELTONA, FL 32738

Title: ST ( ) Delete  
Name: HOGUE, JOHN  
Address: 108 SMOKERISE BLVD  
City-St-Zip: LONGWOOD, FL 32779

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: JOHN HOGUE

ST

04/07/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date