


**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 26, 2004 8:00 am
Secretary of State

04-26-2004 90505 043 ***150.00

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|--|---|
| DOCUMENT # K86922 1. Entity Name D & N INVESTMENTS, INC. |  |
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|---|---|
| Principal Place of Business 2209 WINDWOOD PL VALRICO, FL 33594 US | Mailing Address 2209 WINDWOOD PL VALRICO, FL 33594 US |
|---|---|

DO NOT WRITE IN THIS SPACE



01072004 No Chg-P CR2E034 (10/03)

| | |
|---|---------------------------------------|
| 4. FEI Number 59-2946108 | Applied For Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |

6. Name and Address of Current Registered Agent

**SJOBERG, DALE V.
2209 WINDWOOD PL
VALRICO, FL 33594**

**DO NOT WRITE
IN THIS SPACE**

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

| 10. OFFICERS AND DIRECTORS | |
|--|---|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | DP SJOBERG, DALE V. 2209 WINDWOOD PL VALRICO, FL |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | DST SJOBERG, NANCY J. 2209 WINDWOOD PL VALRICO, FL |
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: *Dale V. Sjoberg* **DATE:** 4/21/04 **DAYTIME PHONE #:** 813 6898848
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR