

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 16, 2007 8:00 am
Secretary of State

01-16-2007 90181 021 ***150.00

DOCUMENT # L64956

1. Entity Name
DEAN OF BUSINESS, INC.



Principal Place of Business
**6186 WINDOVER WAY
TITUSVILLE, FL 32780 US**

Mailing Address
**6186 WINDOVER WAY
TITUSVILLE, FL 32780 US**

2. Principal Place of Business - No P.O. Box #
2400 RIVIERA
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

City & State
TITUSVILLE, FL
Zip
32780 Country
USA

City & State
Zip Country

01132007 Chg-P CR2E034 (12/06)

4. FEI Number
59-2997660

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**DEAN, WESLEY H.
6186 WINDOVER WAY
TITUSVILLE, FL 32780**

7. Name and Address of New Registered Agent

Name **DEAN, WESLEY H.**
Street Address (P.O. Box Number is Not Acceptable)
2400 RIVIERA
City **TITUSVILLE** FL Zip Code **32780**

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 **CHANGE OF ADDRESS ONLY**
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 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 **DP** ☐ Delete
STREET ADDRESS **DEAN, WESLEY H.**
CITY-ST-ZIP **6186 WINDOVER WAY
TITUSVILLE, FL**

TITLE
NAME **V** ☐ Delete
STREET ADDRESS **DEAN, JOYCE H**
CITY-ST-ZIP **6186 WINDOVER WAY
TITUSVILLE, FL**

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME **DP** ☒ Change ☐ Addition
STREET ADDRESS **DEAN, WESLEY H.**
CITY-ST-ZIP **2400 RIVIERA
TITUSVILLE, FL 32780**

TITLE
NAME **V** ☒ Change ☐ Addition
STREET ADDRESS **DEAN, JOYCE H.**
CITY-ST-ZIP **2400 RIVIERA
TITUSVILLE, FL 32780**

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

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.

SIGNATURE: **Wesley H. Dean**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-13-07
Date

(321) 794-1729
Daytime Phone #