

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L81607

FILED  
Jun 22, 2009  
Secretary of State

Entity Name: DAMZAC CORPORATION

## Current Principal Place of Business:

4044 NEWPORT DRIVE  
SUITE 221  
NEW PORT RICHEY, FL 34652

## New Principal Place of Business:

3824 SPRING VALLEY DRIVE  
NEW PORT RICHEY, FL 34655

## Current Mailing Address:

P O BOX 1642  
ELFERS, FL 346801642

## New Mailing Address:

3824 SPRING VALLEY DRIVE  
NEW PORT RICHEY, FL 34655

FEI Number: 59-3017880

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ZACCARO, FRANK A.  
3824 SPRING VALLEY DRIVE  
NEW PORT RICHEY, FL 34655 US

## Name and Address of New Registered Agent:

ZACCARO, FRANK A.  
3824 SPRING VALLEY DRIVE  
NEW PORT RICHEY, FL 34655 US

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: FRANK A. ZACCARO

06/22/2009

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: ZACCARO, FRANK A.  
Address: 3824 SPRING VALLEY DRIVE  
City-St-Zip: NEW PORT RICHEY, FL 34655

Title: T ( ) Delete  
Name: ZACCARO, FRANK A  
Address: 3824 SPRING VALLEY DRIVE  
City-St-Zip: NEW PORT RICHEY, FL 34655

Title: V ( ) Delete  
Name: RICHARD, ZACCARO  
Address: 9337 BARRINGTON LANE  
City-St-Zip: PORT RICHEY, FL 34668

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: ZACCARO, FRANK A  
Address: 3824 SPRING VALLEY DRIVE  
City-St-Zip: NEW PORT RICHEY, FL 34655

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: FRANK A. ZACCARO

PRES

06/22/2009

Electronic Signature of Signing Officer or Director

Date