

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L93149

FILED
Apr 01, 2009
Secretary of State

Entity Name: DAIRY ROAD DISCOVERY CENTER, INC.

Current Principal Place of Business:

2200 DAIRY ROAD
W. MELBOURNE, FL 32904 US

New Principal Place of Business:

Current Mailing Address:

2606 MANORWOOD DR.
MELBOURNE, FL 32901

New Mailing Address:

FEI Number: 59-3016023

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FRESE, GARY B.
930 S. HARBOR CITY BLVD.
SUITE 505
MELBOURNE, FL 32901 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: DP () Delete
Name: GODWIN, NORMA J PRES.
Address: 2606 MANORWOOD DR
City-St-Zip: MELBOURNE, FL 32901 US

Title: DS () Delete
Name: GODWIN, JEFFREY S SEC
Address: 2606 MANORWOOD DR
City-St-Zip: MELBOURNE, FL 32901 US

Title: DV () Delete
Name: WARD, NATALIE J VP
Address: 805 SEDGEWOOD CIRCLE
City-St-Zip: W. MELBOURNE, FL 32904 US

Title: DT () Delete
Name: WARD, KEVIN TREAS
Address: 805 SEDGEWOOD CIRCLE
City-St-Zip: W. MELBOURNE, FL 32904 US

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: JEFFREY S GODWIN

SEC

04/01/2009

Electronic Signature of Signing Officer or Director

_____ Date