

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M12884

FILED
Jan 09, 2009
Secretary of State

Entity Name: DOW GUARANTEE CORPORATION

Current Principal Place of Business:

NO ACTIVE OFFICE
PEMBROKE PINES, FL 33027

New Principal Place of Business:

670 NW 116TH STREET
MIAMI, FL 33168

Current Mailing Address:

C/O NELSON LOCKE
15921 SW 14 ST
PEMBROKE PINES, FL 33027

New Mailing Address:

FEI Number: 59-2662437 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

NELSON, LOCKE
15921 SW 14TH STREET
PEMBROKE PINES, FL 33027 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: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DIR () Change (X) Addition
Name: GORDON, DANIELLE
Address: 2179 NE 179TH STREET
City-St-Zip: NORTH MIAMI BEACH, FL 33162

Title: DIR () Change (X) Addition
Name: KLUCK, GEORGE
Address: 1516 NW 116TH STREET
City-St-Zip: NORTH MIAMI, FL 33168

Title: DIR () Change (X) Addition
Name: LOCKE, CHERYL D
Address: 15921 SW 14TH STREET
City-St-Zip: PEMBROKE PINES, FL 33027

Title: DIR () Change (X) Addition
Name: NCAS LLC,
Address: 15921 SW 14TH STREET
City-St-Zip: PEMBROKE PINES, FL 33027

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: CHERYL LOCKE

DIR

01/09/2009

Electronic Signature of Signing Officer or Director

Date