

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000010868

FILED  
Jan 29, 2007  
Secretary of State

Entity Name: DOMINICUS PRESS, INC.

## Current Principal Place of Business:

1422 SWEETBRIAR RD  
ORLANDO, FL 32806

## New Principal Place of Business:

## Current Mailing Address:

1422 SWEETBRIAR RD  
ORLANDO, FL 32806

## New Mailing Address:

FEI Number: 20-1946489

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

G&L AGENT SERVICES INC  
390 N ORANGE AVE SUITE 600  
ORLANDO, FL 32801 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

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: COFFMAN, DIANA S  
Address: 1422 SWEETBRIAR RD  
City-St-Zip: ORLANDO, FL 32806

Title: VP ( ) Delete  
Name: ANDERSON, MARY JO  
Address: 3219 WALD RD  
City-St-Zip: ORLANDO, FL 32806

Title: TRES ( ) Delete  
Name: CARUSO, CHRISTINE S  
Address: 1723 SPRING LAKE DR  
City-St-Zip: ORLANDO, FL 32804

Title: S ( ) Delete  
Name: LACAMBRA, ANN  
Address: 700 OXFORD RD  
City-St-Zip: WINTER PARK, FL 32789

## 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 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DIANA COFFMAN

P

01/29/2007

Electronic Signature of Signing Officer or Director

Date