2006 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

1 of 2

DOCUMENT # N04000012092

1. Entity Name
DSI SUPPORTERS, INC.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

06 NOV 21 AM 8:55

Principal Place of Business	Mailing Address
5504 MELLI LANE NORTH FORT MYERS, FL 33917-4086	5504 MELLI LANE NORTH FORT MYERS, FL 33917-4086

2. Principal Place of Business	3. Mailing Address
25145 TWIN OAKS LANE Suite, Apt. #, etc.	25145 TWIN OAKS LANE Suite, Apt. #, etc.
City & State: FERNANDINA BEACH, FL	City & State: FERNANDINA BEACH, FL
Zip: 32034 Country: US	Zip: 32034 Country: US

10092006 Chg-NP CR2E037 (4/06)

4. FEI Number: 20-2446084 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
FOSTER, VIOLA M 5504 MELLI LANE NORTH FORT MYERS, FL 33917-4086	Name: CARAWAY, VIRGINIA L. Street Address (P.O. Box Number is Not Acceptable): 25145 TWIN OAKS LANE City: FERNANDINA BEACH FL Zip Code: 32034

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

200081984992
11/21/06--01033--012 **70.00

SIGNATURE: Virginia L. Caraway VIRGINIA L. CARAWAY, SECRETARY
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

Amended AR is $61.25

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D FOSTER, NEURING B JR 5504 MELLI LANE NORTH FORT MYERS, FL 33917	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P/D CARRAWAY, EDWARD A. 25145 TWIN OAKS LANE FERNANDINA BEACH, FL 32034	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D FOSTER, VIOLA M 5504 MELLI LANE NORTH FORT MYERS, FL 33917	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T/D FOSTER, VIOLA M. 5504 MELLI LANE NORTH FORT MYERS, FL 33917	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D HUNZIKER, KARL 720 SHADYSIDE STREET LEHIGH ACRES, FL 33936	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D HUNZIKER, KARL 1550 LEE BLVD., SUITE 318 LEHIGH ACRES, FL 33936	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S/D RA CARAWAY, VIRGINIA L. 25145 TWIN OAKS LANE FERNANDINA BEACH, FL 32034	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V/D STOVER, DONALD R. 4803 WESTBURY COURT NEW PORT RICHEY, FL 34655	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D COTTON, RICKEY 1319 GLENVIEW LANE LAKELAND, FL 33813	☐ Change ☒ Addition

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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 changed, or on an attachment with an address, with all other like empowered.

904-277-666

SIGNATURE: Virginia L. Caraway VIRGINIA L. CARAWAY, SECRETARY & RA
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

PAGE 2 ATTACHMENT TO

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AMENDED ANNUAL REPORT

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1. ENTITY NAME: DSI SUPPORTERS, INC.

4. FEI Number: 20-2446084

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10
CONTINUED

TITLE	D	ADDITION
NAME	ENGELS, DAVID I.	
STREET ADDESS	4812 GARFIELD STREET	
CITY-ST-ZIP	HOLLYWOOD, FL 33021	

TITLE	D	ADDITION
NAME	HOWARD, CONNIE R.	
STREET ADDESS	16550 SW 138TH AVENUE	
CITY-ST-ZIP	ARCHER, FL 32618	

TITLE	D	ADDITION
NAME	LUCKE, L. NORDEN	
STREET ADDESS	5922 NW 27TH STREET	
CITY-ST-ZIP	GAINESVILLE, FL 32653	