2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 25, 2009
Secretary of State

DOCUMENT# N06000012794

Entity Name: DOLLARS & SENSE BNI, INC.

Current Principal Place of Business:

203156 PARKWOOD CIR
PORT SAINT LUCIE, FL 34952

New Principal Place of Business:

10302 S FEDERAL HWY
SUITE 193
PORT SAINT LUCIE, FL 34952

Current Mailing Address:

PO BOX 9161
PORT SAINT LUCIE, FL 34985

New Mailing Address:

10302 S FEDERAL HWY
SUITE 193
PORT SAINT LUCIE, FL 34952

FEI Number: 01-0880829 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

KUCERA, DEBRA
2031 SE PARKWOOD CIRCLE
PORT SAINT LUCIE, FL 34952 US

Name and Address of New Registered Agent:

BAND, JAY
10302 S FEDERAL HWY
SUITE 193
PORT SAINT LUCIE, FL 34952 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: JAY BAND 03/25/2009
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: WILLMORE, NANCY G
Address: 5507 SW MOORE ST
City-St-Zip: PALM CITY, FL 34990

Title: D ( ) Delete
Name: CHILDS, ERIC
Address: 4259 NW FEDERAL HWY.
City-St-Zip: JENSEN BEACH, FL 34957

Title: D ( ) Delete
Name: KUCERA, DEBRA
Address: 2031 SE PARKWOOD CIR.
City-St-Zip: PORT SAINT LUCIE, FL 34952

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: ACKENBRACK, MARK
Address: 10302 S FEDERAL HWY SUITE 193
City-St-Zip: PORT ST LUCIE, FL 34952

Title: VP (X) Change ( ) Addition
Name: PURO, RAYMOND
Address: 10302 S FEDERAL HWY SUITE 193
City-St-Zip: PORT ST LUCIE, FL 34952

Title: T (X) Change ( ) Addition
Name: BAND, JAY
Address: 10302 S FEDERAL HWY
City-St-Zip: PORT SAINT LUCIE, FL 34952

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

SIGNATURE: JAY BAND T 03/25/2009
Electronic Signature of Signing Officer or Director — Date