

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000007710

FILED
Jan 25, 2010
Secretary of State

Entity Name: D.U.I.S-DRIVING YOU IN SAFETY, INC.

Current Principal Place of Business:

121 NE 19TH CT
CAPE CORAL, FL 33909

New Principal Place of Business:

Current Mailing Address:

121 NE 19TH CT
CAPE CORAL, FL 33909

New Mailing Address:

PO BOX 151838
CAPE CORAL, FL 33915-183 US

FEI Number: 26-0630516

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DEVEREAUX, DAVID
121 NE 19TH CT
CAPE CORAL, FL 33909 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: S
Name: DEVEREAUX, LIZ
Address: 121 NE 19TH CT
City-St-Zip: CAPE CORAL, FL 33909

Title: D
Name: SANSGRAINTE, DINA
Address: 3495 HEARTWOOD LN
City-St-Zip: MELBOURNE, FL 32934

Title: ED
Name: DEVEREAUX, DAVID
Address: 121 NE 19TH CT
City-St-Zip: CAPE CORAL, FL 33909

Title: D
Name: FASULA, JEFF
Address: 425 SW MONROE DR
City-St-Zip: PORT ST LUCIE, FL 34986

Title: D
Name: GRAN, THOMAS
Address: 19710 NW 890 DR
City-St-Zip: OKEECHOBEE, FL 34972

Title: P
Name: GREG, FASULA G
Address: 2103 WINDING CREEK LANE
City-St-Zip: FT. PIERCE, FL 34981

I hereby 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 all other like empowered.

SIGNATURE: DAVID DEVEREAUX

E D

01/25/2010

Electronic Signature of Signing Officer or Director

Date