2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Oct 07, 2009
Secretary of State

DOCUMENT# N08000001181

Entity Name: DRIVING SOBER TO SAVE A LIFE, INC.

Current Principal Place of Business:

35010 SMOKETREE LANE
RIDGE MANOR, FL 33523

New Principal Place of Business:

Current Mailing Address:

35010 SMOKETREE LANE
RIDGE MANOR, FL 33523

New Mailing Address:

FEI Number: 26-1947695 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MARCONE, BARRY
35010 SMOKETREE LANE
RIDGE MANOR, FL 33523 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: MARCONE, BARRY
Address: 35010 SMOKETREE LANE
City-St-Zip: RIDGE MANOR, FL 33523

Title: D ( ) Delete
Name: MARCONE, MARY
Address: 5073 SEQUOIA COURT
City-St-Zip: EXPORT, PA 15632

Title: T ( ) Delete
Name: BURGESS, SUE
Address: 33428 RIDGE MANOR BLVD.
City-St-Zip: DADE CITY, FL 33523

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

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: VP ( ) Change (X) Addition
Name: WALKER, BRIAN F
Address: 13399 SUNSET LAKES CIRCLE
City-St-Zip: WINTER GARDEN, FL 34787

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: BARRY MARCONE P 10/07/2009

Electronic Signature of Signing Officer or Director — Date