

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N32772

FILED
Feb 14, 2008
Secretary of State

Entity Name: DADS FOR BOYS INTERNATIONAL, INC.

Current Principal Place of Business:

%JOHN R. PYLE
P.O. BOX 2268
UMATILLA, FL 32784

New Principal Place of Business:

%JOHN R. PYLE
14030 LAKE YALE ROAD
UMATILLA, FL 32784

Current Mailing Address:

%JOHN R. PYLE
P.O. BOX 2268
UMATILLA, FL 32784

New Mailing Address:

FEI Number: 59-2954096 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PYLE, JOHN R
14030 LAKE YALE ROAD
UMATILLA, FL 32784 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: PYLE, JOHN
Address: 14030 LAKE YALE RD
City-St-Zip: UMATILLA, FL 32784

Title: D () Delete
Name: MURPHY, JACK R,
Address: 14030 LAKE YALE RD
City-St-Zip: UMATILLA, FL

Title: T () Delete
Name: PAYTONS, PATRICIA
Address: 4429 BOAT LANDING RD
City-St-Zip: UMATILLA, FL 32784

Title: S () Delete
Name: JACQUART, JOANNE
Address: 14030 LAKE YALE RD
City-St-Zip: UMATILLA, FL 32784

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: T (X) Change () Addition
Name: PAYTONS, PATRICIA
Address: 3072 HUFFER ROAD
City-St-Zip: DOUGLAS, GA 31533

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: JOANNE JACQUART

DIR

02/14/2008

Electronic Signature of Signing Officer or Director

Date