

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000003959

FILED
Jan 03, 2007
Secretary of State

Entity Name: SOUTHEAST KREISGRUPPE DVG AMERICA, INC.

Current Principal Place of Business:

8052 ROMERLY COURT
ORLANDO, FL 32822

New Principal Place of Business:

13040 SW 80 STREET
MIAMI, FL 33183

Current Mailing Address:

8052 ROMERLY COURT
ORLANDO, FL 32822

New Mailing Address:

13040 SW 80 STREET
MIAMI, FL 33183

FEI Number: 91-1858226

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

POOLE, CAROLINE L
8052 ROMERLY COURT
ORLANDO, FL 32822 US

Name and Address of New Registered Agent:

COLE, KIM L
13040 SW 80 STREET
MIAMI, FL 33183 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: KIM COLE

01/03/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: POOLE, CAROLINE
Address: 8052 ROMERLY CT
City-St-Zip: ORLANDO, FL 32822

Title: VPD () Delete
Name: HEPLER, MELISSA
Address: 13454 HAYS RD
City-St-Zip: SPRINGHILL, FL 34610

Title: S () Delete
Name: DAUGAARD, CATHY
Address: 2573 SW DECARD ST.
City-St-Zip: PORT SAINT LUCIE, FL 34953

Title: TD () Delete
Name: HOSKINSON, AMANDA
Address: 7240 RED WING RD
City-St-Zip: GROVELAND, FL 34736

Title: D () Delete
Name: THEEN, RANDY
Address: 3444 NW 50 AVE
City-St-Zip: GAINESVILLE, FL 32605

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: HEPLER, MELISSA
Address: 731 SOLANA LOOP
City-St-Zip: PUNTA GORDA, FL 33950

Title: VPD (X) Change () Addition
Name: JOHNSON, CONNIE
Address: 5535 BOB SMITH AVE
City-St-Zip: PLANT CITY, FL 33565

Title: S (X) Change () Addition
Name: KIEFER, LISA
Address: 2510 41ST AVE, NE
City-St-Zip: NAPLES, FL 34120

Title: TD (X) Change () Addition
Name: COLE, KIM
Address: 13040 SW 80 STREET
City-St-Zip: MIAMI, FL 33183

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

I hereby certify that the information supplied with this filing does not qualify for the 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: CAROLINE L. POOLE

P

01/03/2007

Electronic Signature of Signing Officer or Director

Date