

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000018317

Entity Name: DSANDERS, INC.

FILED  
Mar 22, 2005  
Secretary of State

## Current Principal Place of Business:

5910 GREY FOX DRIVE  
WINTER HAVEN, FL 33884

## New Principal Place of Business:

169 SE BROWNING CIR  
WINTER HAVEN, FL 33884

## Current Mailing Address:

5910 GREY FOX DRIVE  
WINTER HAVEN, FL 33884

## New Mailing Address:

169 SE BROWNING CIR  
WINTER HAVEN, FL 33884

FEI Number: 59-3620088

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SANDERS, DONALD  
5910 GREY FOX DRIVE  
WINTER HAVEN, FL 33884 US

## Name and Address of New Registered Agent:

PROFESSIONAL TAX CONSULTANTS INC  
112 AVENUE E SW  
WINTER HAVEN, FL 33880 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: RONALD A YOST EA

03/22/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: SANDERS, DONALD  
Address: 5910 GREY FOX DR  
City-St-Zip: WINTER HAVEN, FL 33884

Title: VP ( ) Delete  
Name: SANDERS, DONNA  
Address: 5910 GREY FOX DR  
City-St-Zip: WINTER HAVEN, FL 33884

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

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: GAY, JOHN C  
Address: 169 SE BROWNING CIR  
City-St-Zip: WINTER HAVEN, FL 33884

Title: VP (X) Change ( ) Addition  
Name: ROSIN, STACEY M  
Address: 169 SE BROWNING CIR  
City-St-Zip: WINTER HAVEN, FL 33884

Title: S ( ) Change (X) Addition  
Name: YOST, RONALD A  
Address: 401SUWANNEE RD SE  
City-St-Zip: WINTER HAVEN, FL 33884

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOHN C GAY

P

03/22/2005

Electronic Signature of Signing Officer or Director

Date