,2006 FOR PROFIT CORPORATION ANNUAL REPORT

Apr 17, 2006 08:00 AN Secretary of State DOCUMENT # P00000042449 1. Entity Name D.C. WHITFIELD ENTERPRISES, INC. Principal Place of Business Mailing Address 3536 SW THISTLEWOOD LN 3536 SW THISTLEWOOD LN STUART, FL 34994 STUART, FL 34994 CR2E034 (11/05) 04062006 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4, FEI Number Not Applicable 65-1015486 \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent WHITFIELD, DOUGLAS DO NOT WRITE 3536 SW THISTLEWOOD LN STUART, FL 34994 IN THIS SPACE 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. _ Added to Fees After May 1, 2006 Fee will be \$550.00 10. OFFICERS AND DIRECTORS TITLE PVST WHITFIELD, DOUGLAS NAME 3536 SW THISTLEWOOD LN STREET ADDRESS 100000512837 04/29/06-80105-CITY-ST-ZIP STUART, FL 34994 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

FILED

SIGNATURE: JOYA JOYANNE OF SIGNING OFFICER OR DIRECTOR Date Date Cayling Place Cayling Place

other like empor

changed, or on an attachment with

I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or adpolemental report is true and accurate and that my 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 in Block 10 or Block 11 if