2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Feb 06, 2006 8:00 am Secretary of State

DOCUMENT # P0000051837 1. Entity Name D. B. INVESTMENTS OF JACKSONVILLE, INC.								02-06-2006 90074 050 ***150.00				
2 1 5							100					
Principal Place of Business Mailing Address 7532 103RD ST. JACKSONVILLE, FL 32210 JACKSONVILLE, FL 3221					 2210					Y 25.		
2. Principal Place of Business				3. Mailing Address								
Suite, Apt. #, etc.				Suite, Apt. #, etc.				01262006	Chg-P	CR2E034	(11/05)	
City & State				City & State				4. FEI Numbe 59-3648				olied For Applicable
Zip	Zip Country			Zip Country				5. Certificate of Status Desired				
6. Name and Address of Curren				Registered Agent				7. Name and	Address of New R			<u> </u>
		* 11 mar mar ***			·	Name						
PLEIMAN, THOMAS C JR. 9471 BAYMEADOWS ROAD #308 JACKSONVILLE. FL 32256						Street Address (P.O. Box Number is Not Acceptable)						
0.101.001171222, 1.2. 02200												
						City FL Zip Code						
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. 1 am familiar with, and accept the obligations of registered agent.												
SIGNATURE												
entimental de la descripción de la contraction d												
FILE NOWIII FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees												
10.	0 OFFICERS AND DIRECTORS					1. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11						
TITLE	P Delete				TITE	-					M Change	☐ Addition
NAME STREET ADDRESS	BLACK, DEAN A SS 3323 CULLEDON LANE				me Eet address	DRESS 3401 Lannie Rd. Jacksonville, FL 32218						
CITY-ST-ZIP						Y-ST-ZIP	Jac	Kusonvil	Te, FL 3	32218		
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CITY-ST-ZIP						Y-ST-ZIP	<u> </u>		A Florido Artic			:
indicatéd of the co	12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 changed, or on an attachment with an address, with all other like empowered.											