2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000065645

City-St-Zip:

RIVERVIEW, FL 33569

Entity Name: DYEVERSIONS MANAGEMENT, INC.

FILED Mar 14, 2008 Secretary of State

| Current Principal Place of Business: | | | New Principal Pl | New Principal Place of Business: | |
|---|--------------------------------------|----------------------------------|---|---|--|
| 3807 SADDLE RIDGE STREET VALRICO, FL 33594 | | | | 3807 SADDLE RIDGE STREET VALRICO, FL 33596 | |
| Current Mailing Address: | | | New Mailing Add | New Mailing Address: | |
| | DLE RIDGE S [*] FL 33594 | TREET | | | |
| FEI Number | : 59-3659806 | FEI Number Applied For() | FEI Number Not Applicable (|) Certificate of Status Desired () | |
| Name and Address of Current Registered Agent: | | | Name and Addre | Name and Address of New Registered Agent: | |
| | DLE RIDGE S | IREET US | | | |
| | e named entity e of Florida. | submits this statement for the p | ourpose of changing its regis | tered office or registered agent, or both, | |
| SIGNATUI | RE: | | | | |
| | Electror | nic Signature of Registered Ag | ent | Date | |
| Election Car | mpaign Financin | g Trust Fund Contribution (). | | | |
| OFFICERS AND DIRECTORS: | | | ADDITIONS/CHA | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: | |
| Title: Name: Address: City-St-Zip: | DYE, BRADLE | RIDGE STREET | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: City-St-Zip: | DYE, LINDA M | Delete RIDGE STREET 33594 | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: | D () DYE, ANTHON 6605 NORTHH | | Title: Name: Address: | () Change () Addition | |

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

City-St-Zip:

SIGNATURE: BRADLEY M. DYE DIR 03/14/2008