2008 FOR PROFIT CORPORATION

FILED 2008 08:00 AI ate

ANNUAL KEPUK I				Apr 11, 2000 00.0			
DOCU	MENT # P000001166] .		Secretary of St		
1. Entity Nam D&C COI	ne NSTRUCTION, INC.						
Principal Plac	ce of Business	Mailing Address					
3531 LORET		3531 LORETTO RD. JACKSONVILLE, FL 32223		 		NON MORE HIGH DING DING THE RELEASE HERDE	
C	OO NOT WRITE	CE	03112008 No Chg-P CR2E034 (11/05) 4. FEI Number				
	6. Name and Address of Current Re	gistered Agent		!		Fee Required	
FUTCH, DEAN R 3531 LORETTO RD. JACKSONVILLE, FL 32223					NOT W THIS SF		
	e named entity submits this statement for the tions of registered agent.	ne purpose of changing its registere	led office or register	ed agent, or bo	oth, in the State of Fl	orida. I am familiar with, and accept	
SIGNATURE.	Signature, typed or printed name of registered agent and	title if applicable (NOTE: Registere	d Agent signature required	when reinstating)		OATE	
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 9. Election Campaign Finan Trust Fund Contribution.				.00 May Be ed to Fees			
10.	OFFICERS AND DI	RECTORS	I		· · · · · · · · · · · · · · · · · · ·		
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	PD FUTCH, DEAN 3531 LORETTO RD. JACKSONVILLE, FL 32223 ST FUTCH, JILL O					0891344 -80022-002 150.00	
STREET ADDRESS City-St-Zip	3531 LORETTO RD. JACKSONVILLE, FL 32223						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V STITT, IAN 4941 PANTHER TRAIL KEYSTONE HEIGHTS, FL 32656			DO	NOT W	/RITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN	THIS SF	PACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
TITLE							

12. Thereby 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 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.

SIGNATURE:

STREET ADDRESS CITY-ST-75P

> 160 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/11/08 Date

904-880-0875 Daytima Phone #