2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000116642

Entity Name: D&C CONSTRUCTION, INC.

FILED Apr 30, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

3531 LORETTO RD. 4941 PANTHER TRAIL

JACKSONVILLE, FL 32223 KEYSTONE HEIGHTS, FL 32656

Current Mailing Address: New Mailing Address:

3531 LORETTO RD. 4941 PANTHER TRAIL

JACKSONVILLE, FL 32223 KEYSTONE HEIGHTS, FL 32656

FEI Number: 59-3688145 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of New Registered Agent: Name and Address of Current Registered Agent:

FUTCH, DEAN R STITT, IAN A

4941 PANTHER TRAIL 3531 LÓRETTO RD.

JACKSONVILLE, FL 32223 US KEYSTONE HEIGHTS, FL 32656 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: IAN STITT 04/30/2009

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition

FUTCH, DEAN Name: Name: STITT, IAN A

3531 LORETTO RD. 4941 PANTHER TRAIL Address: Address:

City-St-Zip: JACKSONVILLE, FL 32223 City-St-Zip: KEYSTONE HEIGHTS, FL 32656

Title: (X) Delete Title: ST () Change () Addition Name: FUTCH, JILL O Name:

3531 LORETTO RD. Address: Address: JACKSONVILLE, FL 32223 City-St-Zip: City-St-Zip:

Title: Title: (X) Delete () Change () Addition

STITT, IAN Name: Name:

4941 PANTHER TRAIL Address: Address: City-St-Zip: KEYSTONE HEIGHTS, FL 32656 City-St-Zip:

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.

SIGNATURE: IAN STITT 04/30/2009 PD