2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000050060

COLSTON, PATTI J

DEBARY, FL 32713

206 ALTA VISTA STREET

Name: Address:

City-St-Zip:

Entity Name: DEWAIN-REID CONSTRUCTION CORPORATION

FILED Jul 14, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 206 ALTA VISTA STREET DEBARY, FL 32713 **Current Mailing Address: New Mailing Address:** 206 ALTA VISTA STREET DEBARY, FL 32713 FEI Number: 59-3720887 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: TARITY, ROBYN B TARITY, ROBYN B 200 SUNCREST DRIVE 673 PLÁCID RUN ROAD US ORANGE CITY, FL 32763 DEBARY, FL 32713 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: ROBYN B. TARITY 07/14/2008 Electronic Signature of Registered Agent Date In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition COLSTON, DONALD D Name: Name: 206 ALTA VISTA STREET Address: Address: City-St-Zip: DEBARY, FL 32713 City-St-Zip: () Delete Title: VΡ Title: (X) Change () Addition Name: TARITY, MARK R Name: TARITY, MARK R 673 PLACID RUN ROAD 200 SUNCREST DRIVE Address: Address: ORANGE CITY, FL 32763 DEBARY, FL 32713 City-St-Zip: City-St-Zip: Title: Title: (X) Change () Addition TRES () Delete TRES TARITY, ROBYN B TARITY, ROBYN B Name: Name: 673 PLACID RUN ROAD 200 SUNCREST DRIVE Address: Address: City-St-Zip: ORANGE CITY, FL 32763 City-St-Zip: DEBARY, FL 32713 Title: SEC () Delete Title: () 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.

Name:

Address:

City-St-Zip:

SIGNATURE: ROBYN B. TARITY TRES 07/14/2008