2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 07, 2008
Secretary of State

DOCUMENT# P01000052668

Entity Name: DOPPLERDAVE, INC.

Current Principal Place of Business:

6900-29 DANIELS PARKWAY #333
FT. MYERS, FL 33912

New Principal Place of Business:

6900 DANIELS PARKWAY
SUITE 29, PMB 333
FT. MYERS, FL 33912

Current Mailing Address:

6900-29 DANIELS PARKWAY #333
FT. MYERS, FL 33912

New Mailing Address:

6900 DANIELS PARKWAY
SUITE 29, PMB 333
FT. MYERS, FL 33912

FEI Number: 65-1109499 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PVTS ( ) Delete
Name: ROBERTS, DAVID S
Address: 6900-29 DANIELS PARKWAY #333
City-St-Zip: FT. MYERS, FL 33912

Title: D ( ) Delete
Name: ROBERTS, DAVID S
Address: 6900-29 DANIELS PARKWAY #333
City-St-Zip: FT. MYERS, FL 33912

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PVTS (X) Change ( ) Addition
Name: ROBERTS, DAVID S
Address: 6900 DANIELS PARKWAY, SUITE 29, PMB 333
City-St-Zip: FT. MYERS, FL 33912

Title: D (X) Change ( ) Addition
Name: ROBERTS, DAVID S
Address: 6900 DANIELS PARKWAY, SUITE 29, PMB 333
City-St-Zip: FT. MYERS, FL 33912

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: DAVID ROBERTS DIR 01/07/2008

Electronic Signature of Signing Officer or Director — Date