2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000058958

Entity Name: DBC CONSTRUCTION, INC.

FILED Aug 24, 2007 Secretary of State

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

3600 MICHIGAN AVE. 3548 PACKARD AVE.

SAINT CLOUD, FL 34769 SAINT CLOUD, FL 34772 US

Current Mailing Address: New Mailing Address:

3600 MICHIGAN AVE. 3548 PACKARD AVE

SAINT CLOUD, FL 34769 SAINT CLOUD, FL 34772 US

FEI Number: 59-3728955 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:

CREWS, DANIEL CREWS, DANIEL B PD 3600 MICHIGAN AVE. 3548 PACKARD AVE.

SAINT CLOUD, FL 34769 US SAINT CLOUD, FL 34772 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: DANIEL B. CREWS 08/24/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition Name: CREWS, DANIEL PD (X) Change () Addition CREWS, DANIEL

Address: 3600 MICHIGAN AVE. Address: 3548 PACKARD AVE.
City-St-Zip: SAINT CLOUD, FL 34772 US

Title: D () Delete Title: D (X) Change () Addition Name: DAVIS, GLENN Name: LAMONTANGE, THEODORE

Address: 3600 MICHIGAN AVE. Address: 3548 PACKARD AVE.

City-St-Zip: SAINT CLOUD, FL 34769 City-St-Zip: SAINT CLOUD, FL 34772 US

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

 Name:
 GRIFKA, JUSTIN
 Name:
 OWENS, SHANE

 Address:
 3600 MICHIGAN AVE.
 Address:
 3600 MICHIGAN AVE.

 City-St-Zip:
 SAINT CLOUD, FL 34772 US
 SAINT CLOUD, FL 34772 US

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

 Name:
 Name:
 CREWS, RANDLE

 Address:
 Address:
 3600 PACKARD AVE.

 City-St-Zip:
 City-St-Zip:
 SAINT CLOUD, FL 34772 US

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: DANIEL B. CREWS PD 08/24/2007