2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P0100086770 1. Entity Name DUTCH GROUP, INC.				FILED 10 SEP 30 AM II: 19	
				,	
Principal Place of Business Mailing Address 2580 85TH CT. 2580 85TH CT. VERO BEACH, FL 32966 VERO BEACH, FL 32966				SECRETARY OF STATE TALLAHASSEE FLORIDA	
2 Principal P	Place of Business - No P.O. Box #	3. Mailing Address			
<u> </u>					
Suite, Apt. #, etc.		Suite, Apt. #. etc.		09222010 Chg-P CR2E034 (11/08)	
City & State		City & State		4. FEI Number Applied For 65-1135873 Not Applied be	
Zφ	Country .	Zip	Country	5. Certificate of Status Desired	
	6. Name and Address of Curr	ent Registered Agent		7. Name and Address of New Registered Agent	
DEGROO"	T. MARY		Name	Name	
2580 85TH COURT VERO BEACH, FL 32966			Street Address (P.O. Box Number is Not Acceptable)		
			City	FL Zip Code tered agent, or both, in the State of Florida. I am familiar with, and accept	
	Signature, typed or printed name of registered a	9. Election Cam	OTE Registered Agent signature required participations and statement of the statement of th	5.00 May Be	
	ue by September 24, 2010			dded to Fees	
O. ITLE	OFFICERS A	ND DIRECTORS	11,	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
AME TREET ADDRESS	DEGROOT, RICHARD M 2580 85TH CT	boote	NAME STREET ADDRESS CITY-ST-ZIP		
TLE	VERO BEACH, FL 32966	☐ Delete	TITLE	☐ Change ☐ Addition	
AME TREET ADDRESS	DEGROOT, MARY E 2580 85TH CT		NAME STREET ADDRESS CITY-ST-ZIP	 -	
ITY-ST-ZIP	VERO BEACH, FL 32966	□ Delete	TITLE	☐ Change ☐ Addition	
AME TREET ADDRESS ITY - ST - ZIP		Car Dillio	NAME STREET ADDRESS CITY: ST-ZIP	200185756452 09/22/1001023004 **550.00	
TLE AME TREET ADDRESS ITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-2IP	☐ Change ☐ Addition	
TLE AME TREET ADDRESS ITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY: ST-ZIP	Change Addition	
TILE AME TREET ADDRESS ITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
12 Uboroby o	on this feport or suppremental reprotations the receiver or invisies e. or on an attachment with an addre	with this filing does not qualify ort is true and accurate and the improvement to execute this representations, with all other like empowers. OR PRINTED NAME OF BIGNING OFFICE	for the exemptions contain at my signature shall have the cit as required by Chapter 6 ad	ed in Chapter 119, Florida Statutes I further certify that the information e same legal effect as if made under oath; that I am an officer or director 07. Florida Statutes; and that my name appears in Block 10 or Block 11 if	

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