2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 05, 2008
Secretary of State

DOCUMENT# P01000090931

Entity Name: DBM INTERNATIONAL, INC.

Current Principal Place of Business:

1000 E. HIGHWAY 50
SUITE B
CLERMONT, FL 34711

New Principal Place of Business:

Current Mailing Address:

P.O BOX 120187
CLERMONT, FL 34712

New Mailing Address:

FEI Number: 59-3745513 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GURNEY, PATTI
1000 E. HIGHWAY 50
SUITE B- 2ND FLOOR
CLERMONT, FL 34711 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: VP ( ) Delete
Name: MCLEAN, III, WILLIAM B
Address: 17514 COBBLESTON LANE
City-St-Zip: CLERMONT, FL 34711

Title: D ( ) Delete
Name: MCLEAN, JR., WILLIAM B
Address: P.O BOX 120902/20574 SUGARLOAF MOUN. RD.
City-St-Zip: CLERMONT, FL 34711

Title: ST ( ) Delete
Name: MCLEAN, MATT
Address: 10311 SMOKERISE
City-St-Zip: CLERMONT, FL 34711

Title: P ( ) Delete
Name: HOWELL, ALEXANDER M
Address: 17757 CHAMPAGNE DRIVE
City-St-Zip: WINTER GARDEN, FL 34787

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
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: ALEXALDER M HOWELL PRES 03/05/2008

Electronic Signature of Signing Officer or Director — Date