## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000007861

Entity Name: D.B.M. MANAGEMENT COMPANY, INC.

FILED May 04, 2009 Secretary of State

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Current Principal Place of Business:				New Principal Place of Business:		
840 U.S. H	W. KNIGHT, JI IIGHWAY ONE ALM BEACH, F	, #100	US			
Current Mailing Address:				New Mailing Addres	New Mailing Address:	
840 U.S. H	W. KNIGHT, JI HIGHWAY ONE ALM BEACH, F	, #100	US			
FEI Number:	: 90-0101965	FEI Numb	oer Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:				Name and Address of	Name and Address of New Registered Agent:	
340 ROÝA	NEAL W JR IL POINCIANA N NCH, FL 33480		321			
	named entity s of Florida.	ubmits thi	s statement for the	purpose of changing its registere	d office or registered agent, or both,	
SIGNATUR	RE:					
	Electroni	ic Signatu	re of Registered Ag	ent	Date	
			, the corporation did n d Contribution (  ).	ot receive the prior notice.		
OFFICERS AND DIRECTORS:				ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD () MCELROY, JOH 136 NORTH ADA HINSDALE, IL 6	AMS STREE	:T	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VPD () LEBOUTILLIER, PO BOX 230 OLD WESTBUR		68	Title: Name: Address: City-St-Zip:	() 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.

SIGNATURE: JOHN L. MCELROY OFF 05/04/2009