

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000039471

FILED  
Apr 30, 2009  
Secretary of State

Entity Name: DISTINCTIVE PRODUCTS, INC.

**Current Principal Place of Business:**

1120 BLUFIELD AVE  
BRANDON, FL 33511

**New Principal Place of Business:**

**Current Mailing Address:**

1120 BLUFIELD AVE  
BRANDON, FL 33511

**New Mailing Address:**

FEI Number: 14-1880256      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

GARCIA, WENDY L  
11640 GREENSLEEVE AVENUE  
TAMPA, FL 33626    US

**Name and Address of New Registered Agent:**

COTTRILL, JOHN R  
5820 W. LINEBAUGH AVE  
TAMPA, FL 33624    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: JOHN R COTTRILL      04/30/2009  
\_\_\_\_\_  
Electronic Signature of Registered Agent      Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: D      ( ) Delete  
Name: GARCIA, WENDY L  
Address: 11640 GREENSLEEVE AVENUE  
City-St-Zip: TAMPA, FL 33626

Title: D      ( ) Delete  
Name: CALAHAN, CATHY  
Address: 1120 BLUFIELD AVE  
City-St-Zip: BRANDON, FL 33511

Title: D      (X) Delete  
Name: COTTRILL, JOHN  
Address: 5818-B WILINEBAUGH AVE  
City-St-Zip: TAMPA, FL 33624

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: DP      (X) Change ( ) Addition  
Name: COTTRILL, JOHN R  
Address: 5820 W. LINEBAUGH AVE  
City-St-Zip: TAMPA, FL 33624

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: JOHN R COTTRILL      DP      04/30/2009  
\_\_\_\_\_  
Electronic Signature of Signing Officer or Director      Date