## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000059144

Entity Name: DEFENDER PROPERTIES AND INVESTMENTS, INC.

FILED Apr 17, 2008 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

6095 DEER RUN RD 6095 DEER RUN RD

NORTH PORT, FL 34286 US NORTH PORT, FL 34291 US

Current Mailing Address: New Mailing Address:

P.O. BOX 7497 P.O. BOX 7497

NORTH PORT, FL 34287 US NORTH PORT, FL 34290 US

FEI Number: 75-3117518 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:

JACOBS, DONALD P
6093 DEER RUN RD
JACOBS, DONALD P
6093 DEER RUN RD

NORTH PORT, FL 34286 US NORTH PORT, FL 34291 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: 04/17/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

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

 Name:
 JACOBS, DONALD P
 Name:
 JACOBS, DONALD P

 Address:
 6093 DEER RUN RD
 Address:
 6093 DEER RUN RD

 City-St-Zip:
 NORTH PORT, FL 34286 US
 City-St-Zip:
 NORTH PORT, FL 34291 US

Title: VDS () Delete Title: VDS (X) Change () Addition Name: JACOBS, JUDITH N Name: JACOBS, JUDITH N

 Name:
 JACOBS, JUDITH N
 Name:
 JACOBS, JUDITH N

 Address:
 6093 DEER RUN ROAD
 Address:
 6093 DEER RUN ROAD

 City-St-Zip:
 NORTH PORT, FL 34286 US
 City-St-Zip:
 NORTH PORT, FL 34291 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: DONALD JACOBS PDT 04/17/2008