

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000064934

Entity Name: DETECT, INC.

FILED
Jul 21, 2009
Secretary of State

Current Principal Place of Business:

1902 WILSON AVE.
PANAMA CITY, FL 32405 US

New Principal Place of Business:

Current Mailing Address:

1902 WILSON AVE.
PANAMA CITY, FL 32405 US

New Mailing Address:

FEI Number: 54-2113454 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ANDREWS, GARY W
142 ROLLING DUNES DR WEST
SANTA ROSA BEACH, FL 32459 US

Name and Address of New Registered Agent:

ANDREWS, GARY W GARY AN
306 GOLF CLUB DRIVE
SANTA ROSA BEACH, FL 32459 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: GARY ANDREWS

07/21/2009

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: MERRITT, RONALD L
Address: 414 COLORADO AVE
City-St-Zip: LYNN HAVEN, FL 32444 US

Title: D () Delete
Name: KELLY, THOMAS A
Address: 507 HWY 229 F
City-St-Zip: PANAMA CITY, FL 32404

Title: DST () Delete
Name: ANDREWS, GARY W
Address: 142 ROLLING DUNES DR WEST
City-St-Zip: SANTA ROSA BEACH, FL 32459

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: MERRITT, RONALD L GARY AN
Address: 414 COLORADO AVE
City-St-Zip: LYNN HAVEN, FL 32444 US

Title: D (X) Change () Addition
Name: KELLY, THOMAS A GARY AN
Address: 507 HWY 229 F
City-St-Zip: PANAMA CITY, FL 32404

Title: DST (X) Change () Addition
Name: ANDREWS, GARY W GARY AN
Address: 306 GOLF CLUB DRIVE
City-St-Zip: SANTA ROSA BEACH, FL 32459

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: GARY ANDREWS

GARY

07/21/2009

Electronic Signature of Signing Officer or Director

Date