2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2007 08:00 AM
Secretary of State

DOCUMENT # P03000066471

1. Entity Name
DAARPT, INC.

Principal Place of Business	Mailing Address
1006 NO. WOODLAND BOULEVARD DELAND, FL 32720	1006 NO. WOODLAND BOULEVARD DELAND, FL 32720

DO NOT WRITE IN THIS SPACE

04232007 No Chg-P CR2E034 (11/05)

4. FEI Number
81-0625296

☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

TEAL, PARKE S
1006 NO. WOODLAND BOULEVARD
DELAND, FL 32720

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE

Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2007 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	ALDERMAN, MARK DALE
STREET ADDRESS	1006 NO. WOODLAND BOULEVARD
CITY ST ZIP	DELAND, FL 32720
TITLE	D
NAME	RIGSBY, ANN J
STREET ADDRESS	1006 NO. WOODLAND BOULEVARD
CITY ST ZIP	DELAND, FL 32720
TITLE	D
NAME	TEAL, PARKE S
STREET ADDRESS	1006 NO. WOODLAND BOULEVARD
CITY ST ZIP	DELAND, FL 32720
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	

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12. *I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.*

SIGNATURE: Ann J Rigsby 4/24/07

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #