2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 27, 2009
Secretary of State

DOCUMENT# P03000071761

Entity Name: DINE DESIGN GROUP, INC.

Current Principal Place of Business:

533 NE 1ST AVE
OCALA, FL 34470

New Principal Place of Business:

315 NE 14TH STREET
OCALA, FL 34470

Current Mailing Address:

315 NE 14TH STREET
OCALA, FL 34470

New Mailing Address:

FEI Number: 54-2125575 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

FARKAS, LEE B
315 NE 14TH STREET
OCALA, FL 34474 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: ROBERSON, CODA III
Address: 315 NE 14TH STREET
City-St-Zip: OCALA, FL 34470

Title: VD ( ) Delete
Name: BOWMAN, RAYMOND
Address: 315 NE 14TH STREET
City-St-Zip: OCALA, FL 34470

Title: SD ( ) Delete
Name: FARKAS, LEE
Address: 315 NE 14TH STREET
City-St-Zip: OCALA, FL 34470

Title: TD ( ) Delete
Name: LUZURIGA, WEBSTER
Address: 315 NE 14TH STREET
City-St-Zip: OCALA, FL 34470

Title: D ( ) Delete
Name: COLLETT, JEREMY
Address: 315 NE 14TH STREET
City-St-Zip: OCALA, FL 34470

Title: D ( ) Delete
Name: YOUNG, ROBERT JR.
Address: 315 NE 14TH STREET
City-St-Zip: OCALA, FL 34470

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change ( ) Addition
Name: MURLA, SEAN A
Address: 315 NE 14TH STREET
City-St-Zip: OCALA, FL 34470

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: LEE B. FARKAS SD 01/27/2009

Electronic Signature of Signing Officer or Director Date