

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000078779

Entity Name: D B ANDERSON, INC.

FILED
Apr 11, 2006
Secretary of State

Current Principal Place of Business:

311 LIVE OAK STREET
NEW SMYRNA BEACH, FL 32168 US

New Principal Place of Business:

161 N CAUSEWAY
2ND FLOOR STE 5
NEW SMYRNA BEACH, FL 32169 US

Current Mailing Address:

P.O. BOX 1562
NEW SYMRNA BEACH, FL 32170 US

New Mailing Address:

FEI Number: 51-0474088 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ANDERSON, DONALD B
2520 CLARENDON AVE
NEW SMYRNA BEACH, FL 32168 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: D () Delete
Name: ANDERSON, DONALD B
Address: 2520 CLARENDON AVE
City-St-Zip: NEW SMYRNA BEACH, FL 32168

Title: D () Delete
Name: ANDERSON, ERIN L
Address: 2520 CLARENDON AVE
City-St-Zip: NEW SMYRNA BEACH, FL 32168

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: ERIN ANDERSON

VP

04/11/2006

Electronic Signature of Signing Officer or Director

Date