2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000083836

Entity Name: DAVE CO BUILDINGS

FILED Jul 15, 2009 Secretary of State

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

18167 NW BOB GUILFORD RD. BLOUNTSTOWN, FL 32424

Current Mailing Address: New Mailing Address:

18167 NW BOB GUILFORD RD. BLOUNTSTOWN, FL 32424

FEI Number: 91-2199004 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

TYUS, BRANDON 15255 NW GRIFFIN LANE ALTHA, FL 32421

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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete ZIESEMER, DAVE Name: 18347 NW JAP AUSTIN RD Address:

City-St-Zip: BLOUNTSTOWN, FL 32424

Title: VD () Delete Name: MARTIN, MICHAEL 14922 SW ALOE SPRINGS RD Address: BLOUNTSTOWN, FL 32424 City-St-Zip:

() Delete Title: SD ZIESEMER, SHANNON R Name: 19347 NW JAP AUSTIN RD Address: City-St-Zip: BLOUNTSTOWN, FL 32424 Title: (X) Change () Addition

ZIESEMER, DAVE Name:

18347 NW BOB GUILFORD RD Address: City-St-Zip: BLOUNTSTOWN, FL 32424

Title: VD (X) Change () Addition

Name: MARTIN, MICHAEL 19448 NW YODER LANE Address: BLOUNTSTOWN, FL 32424 City-St-Zip:

Title: (X) Change () Addition SD Name: ZIESEMER, SHANNON R 19347 NW BOB GUILFORD RD Address: City-St-Zip: BLOUNTSTOWN, FL 32424

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: DAVID ZIESEMER PD 07/15/2009