

2007 FOR PROFIT CORPORATION  
ANNUAL REPORT

DOCUMENT # P04000022414

1. Entity Name  
DENNIS L. DALE EXCAVATING, INC.



FILED  
May 02, 2007 8:00 am  
Secretary of State

05-02-2007 90048 045 \*\*\*150.00

Principal Place of Business  
459 BAILEY ROAD  
VENICE, FL 34292 US

Mailing Address  
459 BAILEY ROAD  
VENICE, FL 34292 US

**DO NOT WRITE IN THIS SPACE**

4009743U

( P 0 4 0 0 0 0 2 2 4 1 4 P )

01062007 No Chg-P CR 2E034 (11/05)

4. FEI Number NOT APPLICABLE	Applied For Not Applicable
5. Certificate of Status Desired	<input type="checkbox"/> \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DALE, DENNIS L  
459 BAILEY ROAD  
VENICE, FL 34292

**DO NOT WRITE  
IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent's signature required when re-instating)

DATE

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 NAME STREET ADDRESS CITY - ST - ZIP	P DALE, DENNIS L 459 BAILEY ROAD VENICE, FL 34202
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP DALE, DENNIS L 459 BAILEY ROAD VENICE, FL 34202
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S DALE, DENNIS L 459 BAILEY ROAD VENICE, FL 34202
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T DALE, DENNIS L 459 BAILEY ROAD VENICE, FL 34292
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D DALE, DENNIS L 459 BAILEY ROAD VENICE, FL 34292
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

**DO NOT WRITE  
IN THIS SPACE**

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 empowerments.

SIGNATURE *Dennis L. Dale*

DENNIS L. DALE 941-485-8892