2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000026919

Entity Name: D. DICE CONSTRUCTION & REMODELING, INC.

FILED Mar 22, 2008 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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6615 BOWIE RD 3794 BEDFORD DRIVE

JACKSONVILLE, FL 32219 US MIDDLEBURG, FL 32068 US

Current Mailing Address: New Mailing Address:

6615 BOWIE RD 3794 BEDFORD DRIVE

JACKSONVILLE, FL 32219 US MIDDLEBURG, FL 32068 US

FEI Number: 20-0721381 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

DICE, DAVID L DICE, DAVID L

6615 BOWIE RD. 3794 BEDFORD DRIVE.

JACKSONVILLE, FL 32219 US MIDDLEBURG, FL 32068 US

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: DAVID DICE 03/22/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPST () Delete Title: DPST (X) Change () Addition

 Name:
 DICE, DAVID L
 Name:
 DICE, DAVID L

 Address:
 6615 BOWIE RD.
 Address:
 3794 BEDFORD DRIVE

Address: 6615 BOVVIE RD. Address: 3/94 BEDFORD DRIVE
City-St-Zip: JACKSONVILLE, FL 32219 US City-St-Zip: MIDDLEBURG, FL 32068 US

Title: DV () Delete Title: DV (X) Change () Addition

Name:WILLIAMSON, ANDRAMINAName:WILLIAMSON, ANDRAMINAAddress:8166 SABLE WOODS DRIVE NORTHAddress:3948 VICTORIA LNDG DR SCity-St-Zip:JACKSONVILLE, FL 32244 USCity-St-Zip:JACKSONVILLE, FL 32208 US

Title: D () Delete Title: () Change () Addition

 Name:
 FORD, NATHANIEL
 Name:

 Address:
 1102 POWHATTAN STREET
 Address:

 City-St-Zip:
 JACKSONVILLE, FL 32219 US
 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: DAVID L DICE DPST 03/22/2008