

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000032461

FILED
Jul 10, 2007
Secretary of State

Entity Name: DISASTER MANAGEMENT CONSULTANTS INC.

Current Principal Place of Business:

1721 SPRING STAR COURT
JACKSONVILLE, FL 32221

New Principal Place of Business:

5387 MANNING CEMETERY RD.
JACKSONVILLE, FL 32234

Current Mailing Address:

1721 SPRING STAR COURT
JACKSONVILLE, FL 32221

New Mailing Address:

P.O. BOX 61885
JACKSONVILLE, FL 32236

FEI Number: 41-2126468

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

KETCHIE, KAREN G
1721 SPRING STAR COURT
JACKSONVILLE, FL 32221 US

Name and Address of New Registered Agent:

KETCHIE, KAREN G
5387 MANNING CEMETERY RD
JACKSONVILLE, FL 32234 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: _____

Electronic Signature of Registered Agent

07/10/2007

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: KETCHIE, KAREN G
Address: 1721 SPRING STAR CT
City-St-Zip: JACKSONVILLE, FL 32224

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: KETCHIE, KAREN G
Address: 5387 MANNING CEMETERY RD.
City-St-Zip: JACKSONVILLE, FL 32234

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: KAREN G. KETCHIE, RN, EMT-P

Electronic Signature of Signing Officer or Director

PRES

07/10/2007

Date