## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000038182

Entity Name: DCS CONTRACTORS, INC.

FILED Apr 13, 2006 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 6750 TURTLE MOUND RD. NEW SMYRNA BEACH, FL 32169 **Current Mailing Address: New Mailing Address:** 6750 TURTLE MOUND RD. 3418 VICTORY PALM DRIVE NEW SMYRNA BEACH, FL 32169 EDGEWATER, FL 32141 FEI Number: 14-1903953 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: SCHERER, DANIEL SCHERER, DANIEL C 6750 TURTLE MOUND RD. 6750 TURTLE MOUND RD. NEW SMYRNA BEACH, FL 32169 NEW SMYRNA BEACH, FL 32169 US 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: DANIEL C. SCHERER 04/13/2006 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: PRFS ( ) Delete () Change () Addition SCHERER, DANIEL C Name: Name: 6750 TURTLE MOUND RD. Address: Address: City-St-Zip: NEW SMYRNA BEACH, FL 32169 City-St-Zip: Title: VΡ Title: ( ) Delete () Change () Addition Name: ALLEN, WILLIAM Name: 402 SHADY LANE Address: Address: ORANGE CITY, FL 32763 City-St-Zip: City-St-Zip: Title: Title: VΡ ( ) Delete VΡ (X) Change ( ) Addition PEYER, GAIL M PEYER, GAIL M Name: Name: 3418 VICTORY PALM DRIVE 3418 VICTORY PALM DRIVE Address: Address: City-St-Zip: EDGEWATER, FL 32169 City-St-Zip: EDGEWATER, FL 32141 Title: VΡ () Delete Title: () Change () Addition SCHERER, ABBY D Name: Name: Address: 6750 TURTLE MOUND ROAD Address: City-St-Zip: NEW SMYRNA BEACH, FL 32169 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: DANIEL C. SCHERER PRES 04/13/2006	SIGNATURE: D	JANIEL C. SCHERER	PRES	04/13/2000
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