

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000051915

Entity Name: D & A PROPERTIES (NUNEZ), INC.

FILED
Jan 09, 2007
Secretary of State

Current Principal Place of Business:

610 N. PARROTT AVE.
OKEECHOBEE, FL 34972

New Principal Place of Business:

Current Mailing Address:

610 N. PARROTT AVE.
OKEECHOBEE, FL 34972

New Mailing Address:

FEI Number: 20-0721573 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

NUNEZ, DAVID
2085 SE 4TH STREET
OKEECHOBEE, FL 34974 US

Name and Address of New Registered Agent:

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:

Title: D () Delete
Name: NUNEZ, DAVID
Address: 2085 SE 4TH STREET
City-St-Zip: OKEECHOBEE, FL 34974

Title: D () Delete
Name: NUNEZ, ANITA
Address: 2085 SE 4TH STREET
City-St-Zip: OKEECHOBEE, FL 34974

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VPT (X) Change () Addition
Name: NUNEZ, DAVID
Address: 2085 SE 4TH STREET
City-St-Zip: OKEECHOBEE, FL 34974

Title: PS (X) Change () Addition
Name: NUNEZ, ANITA
Address: 2085 SE 4TH STREET
City-St-Zip: OKEECHOBEE, FL 34974

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: ANITA NUNEZ

PS

01/09/2007

Electronic Signature of Signing Officer or Director

_____ Date