2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000053264

City-St-Zip:

LUTZ, FL 33548

Entity Name: D&D OUTDOOR FLEX INSTALLATIONS INC.

FILED Apr 29, 2009 Secretary of State

| | Principal Place | e of Business: | New Principal Place o | New Principal Place of Business: | |
|---|---------------------------------------|----------------------------------|-----------------------------------|--|--|
| LUTZ, FL | | | | | |
| Current Mailing Address: | | | New Mailing Address | New Mailing Address: | |
| 17946 SIN LUTZ, FL | MMONS ROAD 33548 | | | | |
| FEI Numbe | r: 20-1071661 | FEI Number Applied For () | FEI Number Not Applicable () | Certificate of Status Desired () | |
| Name and Address of Current Registered Agent: | | | Name and Address of | Name and Address of New Registered Agent: | |
| | , DUANE V MMONS ROAD . 33548 US | | | | |
| | e named entity te of Florida. | submits this statement for the p | urpose of changing its registered | office or registered agent, or both, | |
| SIGNATL | JRE: | | | | |
| | Electro | nic Signature of Registered Age | ent | Date | |
| Election Ca | ampaign Financin | g Trust Fund Contribution (). | | | |
| OFFICERS AND DIRECTORS: | | | ADDITIONS/CHANGE | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: | |
| Title: Name: Address: | P (DOOLEY, DUA 17946 SIMMOI | | Title: Name: Address: | () Change () Addition | |

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: DUANE DOOLEY PRES 04/29/2009