

FILED
Apr 19, 2005 8:00 am
Secretary of State

02-24-2005 90050 002 ***150.00

2005 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # P04000083724			
1. Entity Name DIRECT CANADIAN DISCOUNT, INC.			
Principal Place of Business 2033 WOOD ST STE 218 SARASOTA, FL 34237		Mailing Address P.O. BOX 4009 SARASOTA, FL 34230	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. FEI Number 571136240		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		Additional Fee Required \$8.75	
6. Name and Address of Current Registered Agent TRAWICK, HENRY P JR 2033 WOOD ST STE 218 SARASOTA, FL 34237		7. Name and Address of New Registered Agent FRED HOLLINGSWORTH, III 5151 Jungle Plum Road Sarasota, FL 34242	
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE: <i>Fred Hollingsworth, III</i> DATE: February 11, 2005 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when renewing)			
FILE NOW!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Change ☒ Addition	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Change ☐ Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other filers empowered.			
SIGNATURE: <i>Judy S. Hollingsworth</i> JUDY S. HOLLINGSWORTH, AS President		February 11, 2005 Date	