

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000132126

Entity Name: DFI CORPORATION

FILED
Jan 08, 2009
Secretary of State

Current Principal Place of Business:

5055 BABCOCK ST., NE STE #4
PALM BAY, FL 32905

New Principal Place of Business:

5055 BABCOCK ST., NE
SUITE 4
PALM BAY, FL 32905

Current Mailing Address:

5055 BABCOCK ST., NE STE #4
PALM BAY, FL 32905

New Mailing Address:

5055 BABCOCK ST., NE
SUITE 4
PALM BAY, FL 32905

FEI Number: 20-1692979

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COLOMBO, JOSEPH G
2351 W. EAU GALLIE BLVD., STE. 1
MELBOURNE, FL 32935 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: VST () Delete
Name: FACCIOBENE, DON
Address: 5055 BABCOCK ST. NE STE. 4
City-St-Zip: PALM BAY, FL 32905

Title: P () Delete
Name: COLOMBO, ROBERT L
Address: 543 PEREGRINE DR.
City-St-Zip: INDIALANTIC, FL 32903

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: DON FACCIOBENE

MR

01/08/2009

Electronic Signature of Signing Officer or Director

Date