

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000154194

Entity Name: D L INDUSTRIES, INC.

FILED
May 16, 2005
Secretary of State

Current Principal Place of Business:

1132 HIGHWAY A1A
SATELLITE BEACH, FL 32937 US

New Principal Place of Business:

Current Mailing Address:

1132 HIGHWAY A1A
SATELLITE BEACH, FL 32937 US

New Mailing Address:

FEI Number: 20-1884517

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LAWN, NORMAN
1132 HIGHWAY A1A
SATELLITE BEACH, FL 32937 US

Name and Address of New Registered Agent:

LAWN, DECLAN
1132 HIGHWAY A1A
SATELLITE BEACH, FL 32937 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: DECLAN LAWN

05/16/2005

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSTD () Delete
Name: LAWN, DECLAN
Address: 1132 HIGHWAY A1A
City-St-Zip: SATELLITE BEACH, FL 32937 US

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: 1VP () Change (X) Addition
Name: REPPIN, NICOLE
Address: 1132 HIGHWAY A1A
City-St-Zip: SATELLITE BEACH, FL 32937 US

Title: 2VP () Change (X) Addition
Name: WELCH, SANDRA
Address: 1132 HIGHWAY A1A
City-St-Zip: SATELLITE BEACH, FL 32937 US

I hereby certify that the information supplied with this filing does not qualify for the 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 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: DECLAN LAWN

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05/16/2005

Electronic Signature of Signing Officer or Director

Date