

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000045536

Entity Name: DNM CONSULTING, INC.

FILED  
Jan 08, 2007  
Secretary of State

## Current Principal Place of Business:

P.O. BOX 892  
CHIEFLAND, FL 32644 US

## New Principal Place of Business:

391 SW COUNTY ROAD 345  
CHIEFLAND, FL 32626 US

## Current Mailing Address:

P.O. BOX 892  
CHIEFLAND, FL 32644 US

## New Mailing Address:

FEI Number: 20-2579004      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

MULLER, DOREEN  
391 SW COUNTY ROAD 345  
CHIEFLAND, FL 32624 US

## Name and Address of New Registered Agent:

MULLER, DOREEN  
391 SW COUNTY ROAD 345  
CHIEFLAND, FL 32626 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: \_\_\_\_\_

Electronic Signature of Registered Agent

01/08/2007

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: MULLER, DOREEN  
Address: P.O. BOX 892  
City-St-Zip: CHIEFLAND, FL 32644 US

Title: S ( ) Delete  
Name: MULLER, KIT  
Address: P.O. BOX 892  
City-St-Zip: CHIEFLAND, FL 32644 US

## 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 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: DOREEN MULLER

Electronic Signature of Signing Officer or Director

P

01/08/2007

Date