

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 27, 2008 08:00 AM
Secretary of State

DOCUMENT # P05000110447

1. Entity Name
DREADNAUGHT HOLDINGS CORPORATION



Principal Place of Business
2365 ROLLING HILLS DR
ST AUGUSTINE, FL 32086

Mailing Address
2365 ROLLING HILLS DR
ST AUGUSTINE, FL 32086



02162008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 20-3337533	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DRILL, WALTER P
2365 ROLLING HILLS DR
ST AUGUSTINE, FL 32086

**DO NOT WRITE
IN THIS SPACE**

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

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	DST
NAME	DRILL, WALTER P
STREET ADDRESS	2365 ROLLING HILLS DR
CITY-STATE-ZIP	ST AUGUSTINE, FL 32086

TITLE	DP
NAME	DRILL, WALTER B
STREET ADDRESS	2365 ROLLING HILLS DR
CITY-STATE-ZIP	ST AUGUSTINE, FL 32086

TITLE	
NAME	
STREET ADDRESS	
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STREET ADDRESS	
CITY-STATE-ZIP	

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04/09/08-80121-019 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

WALTER P. DRILL

3/25/2008

Date

Daytime Phone #

904-827-9568