2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000114079

Entity Name: DESANTIS HOLDINGS, INC.

FILED Jul 09, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

411 OLIVE CREEK FARM DR
THOMASVILLE, GA 31757
217 JOHN KNOX ROAD
TALLAHASSEE, FL 32303

Current Mailing Address: New Mailing Address:

411 OLIVE CREEK FARM DR
THOMASVILLE, GA 31757

217 JOHN KNOX ROAD
TALLAHASSEE, FL 32303

FEI Number: 20-3326034 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

DESANTIS, PETER III
C/O TALLAHASSEE LAND
217 JOHN KNOX RD
TALLAHASSEE, FL 32303 US

DESANTIS, PETER A III
C/O TALLAHASSEE LAND
217 JOHN KNOX RD
TALLAHASSEE, FL 32303 US

TALLAHASSEE, FL 32303 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: PETER A. DESANTIS, III 07/09/2007

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: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: () Change () Addition

 Name:
 DESANTIS, PETER III
 Name:

 Address:
 217 JOHN KNOX RD
 Address:

 City-St-Zip:
 TALLAHASSEE, FL 32303
 City-St-Zip:

Title: V (X) Delete Title: () Change () Addition

 Name:
 DESANTIS, PETER JR.
 Name:

 Address:
 411 OLIVE CREEK FARM DR
 Address:

 City-St-Zip:
 THOMASVILLE, GA 31757
 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: PETER A. DESANTIS,III P 07/09/2007