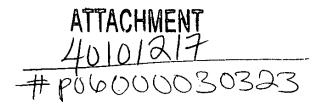
## 2008 FOR PROFIT CORPORATION **ANNUAL REPORT**

changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

## May 13, 2008 8:00 am Secretary of State DOCUMENT # P06000030323 05-13-2008 90010 023 \*\*\*150.00 DC SERVICES OF NORTHEAST FLORIDA, INC. Principal Place of Business Mailing Address PO BOX 15635 1553 CANTERBURY LANE FERNANDINA BCH, FL 32035 FERNANDINA BCH, FL 32034 2. Principal Place of Business - No P.O. Box # Mailing Address 994 Chad St P.O. Box 15635 Suite, Apt. #, etc 05122008 CR2E034 (12/06) City & State 4. FEI Number Applied For 65-1268592 ernandina beach F ternandina Not Applicable \$8.75 Additional 5. Certificate of Status Desired 32035 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent STRICKLAND, JOSEPH M 1553 CANTERBURY LANE FERNANDINA BCH, FL 32034 32034 Hernandina 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 \$5.00 May Be FILE NOW!!! FEE IS \$550.00 9. Election Campaign Financing Trust Fund Contribution. Added to Fees Due by September 12, 2008 OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE **PDTS** ☐ Delete TITLE ☐ Change ☐ Addition STRICKLAND, JOSEPH M NAME NAME 1553 CANTERBURY LANE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP FERNANDINA BCH, FL 32034 CHTY-ST-ZIP No longer an officer ☐ Change ☐ Addition TITLE LEDBETTER, LEE NAME NAME 1725 PHEASANT LANE STREET ADDRESS STREET ADDRESS FERNANDINA BCH, FL 32034 CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Detete TITLE Change | ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-709 CITY-ST-7IP ☐ Change ☐ Addition TITLE ☐ Detete TITLE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change Addition TITLE □ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP 12. I hereby certify that the information supplied with this filling 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

FILED



To Whom It May Concern:

My name is Joseph Strickland and I am the president of DC SERVICES OF NORTHEAST FLORIDA, INC. I made the mistake of thinking the filing deadline for the annual report was May 15<sup>th</sup> of 2008 and I was wrong. I do not currently have the funds to send a \$550.00 check. So, I am sending a \$150.00 check along with my report and asking the Division of Corporations will forgive the late fee. If that is not possible then I will make arrangements to pay the \$400.00 penalty.

Thank you for your time. Sincerely,
Joe Strickland