2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 16, 2009
Secretary of State

DOCUMENT# P06000033035

Entity Name: DEMOGRAPHIC DESIGNS, INC.

Current Principal Place of Business:

1709 EDGEWOOD AVENUE SOUTH
JACKSONVILLE, FL 32205

New Principal Place of Business:

1717 WOODMERE DRIVE
JACKSONVILLE, FL 32210

Current Mailing Address:

1709 EDGEWOOD AVENUE SOUTH
JACKSONVILLE, FL 32205

New Mailing Address:

1717 WOODMERE DRIVE
JACKSONVILLE, FL 32210

FEI Number: 20-4444701 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WALKER, MEGAN
1709 EDGEWOOD AVENUE SOUTH
JACKSONVILLE, FL 32205 US

Name and Address of New Registered Agent:

WALKER, MEGAN B
1717 WOODMERE DRIVE
JACKSONVILLE, FL 32210 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: MEGAN WALKER 04/16/2009
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: WALKER, MEGAN
Address: 1709 EDGEWOOD AVENUE SOUTH
City-St-Zip: JACKSONVILLE, FL 32205

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DIR. (X) Change ( ) Addition
Name: WALKER, MEGAN B
Address: 1717 WOODMERE DRIVE
City-St-Zip: JACKSONVILLE, FL 32210

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: MEGAN WALKER DIR. 04/16/2009
Electronic Signature of Signing Officer or Director Date