

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000066317

FILED
Mar 24, 2008
Secretary of State

Entity Name: CURBAPPEAL BY DOUG CORP.

Current Principal Place of Business:

1220 9TH ST S.W.
NAPLES, FL 34117

New Principal Place of Business:

Current Mailing Address:

1220 9TH ST S.W.
NAPLES, FL 34117

New Mailing Address:

FEI Number: 20-4885631

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FULLER, DOUG A.M.
1220 9TH ST S.W.
NAPLES, FL 34117 US

Name and Address of New Registered Agent:

ALL FLORIDA FIRM INC
813 DELTONA BLVD
STE A
DELTONA, FL 32725 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: SHANNON DUNN FOR ALL FLORIDA FIRM INC

03/24/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: FULLER, DOUGLAS A. M. MR.
Address: 1220 9TH ST S.W.
City-St-Zip: NAPLES, FL 34117

Title: V () Delete
Name: FULLER, TRACY J MRS.
Address: 1220 9TH ST S.W.
City-St-Zip: NAPLES, FL 34117

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: FULLER, DOUGLAS
Address: 1220 9TH ST S.W.
City-St-Zip: NAPLES, FL 34117

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D () Change (X) Addition
Name: FULLER, DEVAN
Address: 1220 9TH ST SW
City-St-Zip: NAPLES, FL 34117

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: SHANNON DUNN FOR DOUG FULLER

RA

03/24/2008

Electronic Signature of Signing Officer or Director

Date