2008 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # P06000085675

1. Entity Name
D & B ENTERPRISES, INC. OF CLERMONT

Principal Place of Business	Mailing Address
3407 CAPLAND AVE	3407 CAPLAND AVE
CLERMONT, FL 34711	CLERMONT, FL 34711

DO NOT WRITE IN THIS SPACE

03262008   No Chg-P   CR2E034 (11/05)

4. FEI Number	Applied For
45-0435923	Not Applicable

5. Certificate of Status Desired ☐   **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

PILKINTON, DIANE
3407 CAPLAND AVE
CLERMONT, FL 34711

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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

04/11/08-80019-002 150.00

10.   OFFICERS AND DIRECTORS

TITLE	PD	
NAME	PILKINTON, DIANE	
STREET ADDRESS	3407 CAPLAND AVE	
CITY-ST-ZIP	CLERMONT, FL 34711	
TITLE	VD	
NAME	PILKINTON, WILLIAM	
STREET ADDRESS	3407 CAPLAND AVE	
CITY-ST-ZIP	CLERMONT, FL 34711	
TITLE		
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
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TITLE		
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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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: _____   3/28/08   352-243-8267

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #