

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000089773

Entity Name: DA MOLLISON INC

FILED
Mar 30, 2008
Secretary of State

Current Principal Place of Business:

7817 LAUREL VIEW DRIVE
MT DORA, FL 32757

New Principal Place of Business:

28130 STATE ROAD 46
SORRENTO, FL 32776

Current Mailing Address:

7817 LAUREL VIEW DRIVE
MT DORA, FL 32757

New Mailing Address:

28130 STATE ROAD 46
SORRENTO, FL 32776

FEI Number: 20-5162599

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEVIN, PATTI
1250 MT HOMER RD
SUITE 3
EUSTIS, FL 32726 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MOLLISON, DAVID A
Address: 7817 LAUREL VIEW DRIVE
City-St-Zip: MT DORA, FL 32757

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MOLLISON, DAVID A
Address: 28130 STATE ROAD 46
City-St-Zip: SORRENTO, FL 32776

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: DAVID A. MOLLISON

PRES

03/30/2008

Electronic Signature of Signing Officer or Director

Date