2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 13, 2008
Secretary of State

DOCUMENT# P06000092540

Entity Name: DEER VALLEY CORPORATION

Current Principal Place of Business:

4904 EISENHOWER BLVD., SUITE 185
TAMPA, FL 33634

New Principal Place of Business:

Current Mailing Address:

4904 EISENHOWER BLVD., SUITE 185
TAMPA, FL 33634

New Mailing Address:

FEI Number: 20-5256635 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

JONES, BRENT
220 SOUTH FRANKLIN STREET
TAMPA, FL 33634 US

Name and Address of New Registered Agent:

JONES, BRENT
1801 N. HIGHLAND AVENUE
TAMPA, FL 33602 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: BRENT JONES 02/13/2008
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: MASTERS, CHARLES G
Address: 4904 EISENHOWER BLVD., SUITE 185
City-St-Zip: TAMPA, FL 33634

Title: D ( ) Delete
Name: LOGAN, JOEL S III
Address: 4904 EISENHOWER BLVD., SUITE 185
City-St-Zip: TAMPA, FL 33634

Title: D ( ) Delete
Name: MURPHREE, CHARLES L JR.
Address: 4904 EISENHOWER BLVD., SUITE 185
City-St-Zip: TAMPA, FL 33634

Title: D ( ) Delete
Name: LAWLER, JOHN S
Address: 4904 EISENHOWER BLVD., SUITE 185
City-St-Zip: TAMPA, FL 33634

Title: D ( ) Delete
Name: HANS, BEYER C
Address: 4904 EISENHOWER BLVD., SUITE 185
City-St-Zip: TAMPA, FL 33634

Title: D ( ) Delete
Name: PHILLIPS, DALE E
Address: 4904 EISENHOWER BLVD., SUITE 185
City-St-Zip: TAMPA, FL 33634

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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

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: CHARLES G. MASTERS P 02/13/2008
Electronic Signature of Signing Officer or Director Date