

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000027898

Entity Name: DOUGHBOYZ ENTERPRIZES, INC.

FILED
Sep 18, 2008
Secretary of State

Current Principal Place of Business:

5809 US HIGHWAY 41 NORTH
APOLLO BEACH, FL 33570 US

New Principal Place of Business:

Current Mailing Address:

5809 US HIGHWAY 41 NORTH
APOLLO BEACH, FL 33570 US

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CLARKE, JESS F III
429 MIRA BAY BLVD.
APOLLO BEACH, FL 33572 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: KELLY, CHAD
Address: 1004 SYMPHONY ISLES BLVD.
City-St-Zip: APOLLO BEACH, FL 33572 US

Title: VP () Delete
Name: CLARKE, JESS F III
Address: 429 MIRA BAY BLVD.
City-St-Zip: APOLLO BEACH, FL 33572 US

Title: SEC () Delete
Name: SYKES, CHRISTOPHER R
Address: 1834 MIRA LAGO CIRCLE
City-St-Zip: RUSKIN, FL 33570 US

Title: TRES (X) Delete
Name: THOMAS, SCOTT
Address: 509 MIRA BAY BLVD.
City-St-Zip: APOLLO BEACH, FL 33572 US

Title: DIR (X) Delete
Name: BAKER, KENNETH
Address: 5141 CLOVER MIST DR.
City-St-Zip: APOLLO BEACH, FL 33572 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: THOMAS, SCOTT
Address: 509 MIRA BAY BLVD.
City-St-Zip: APOLLO BEACH, FL 33572 US

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

Title: () Change () Addition
Name:
Address:
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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: SCOTT THOMAS

P

09/18/2008

Electronic Signature of Signing Officer or Director

Date