2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000063231

Entity Name: DCJPE, INC.

FILED Apr 28, 2009 Secretary of State

Name and Address of Current Registered Agent: JONES, DAVID C 1320-103 HENDRIX ROAD 1320-103 HENDRIX ROAD 1320 HENDRIX ROAD 103 TALLAHASSEE, FL 32301 US The above named entity submits this statement for the purpose of changing its registered office or register in the State of Florida. SIGNATURE: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS Title: PRES () Delete Name: JONES, DAVID C Address: 1320-103 HENDRIX ROAD City-St-Zip: TALLAHASSEE, FL 32301 US Title: TRES () Delete Name: JONES, DAVID C Address: 1320-103 HENDRIX ROAD City-St-Zip: TALLAHASSEE, FL 32301 US Title: SECT () Delete Name: JONES, VERONICA M Address: 1320-103 HENDRIX ROAD Address			
TALLAHASSEE, FL 32301	Current P	rincipal Place of Business:	New Principal Place of Business:
1320-103 HENDRIX ROAD 1320 HENDRIX ROAD 103 TALLAHASSEE, FL 32301 US 103 TALLAHASSEE, FL 32301 US TALLAHASSEE,			103
TALLAHASSEE, FL 32301 US	Current Mailing Address:		New Mailing Address:
Name and Address of Current Registered Agent: JONES, DAVID C 1320-103 HENDRIX ROAD TALLAHASSEE, FL 32301 US The above named entity submits this statement for the purpose of changing its registered office or register in the State of Florida. SIGNATURE: Electronic Signature of Registered Agent Date Electron Campaign Financing Trust Fund Contribution (). OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS Title: PRES () Delete Name: JONES, DAVID C Address: City-St-Zip: TALLAHASSEE, FL 32301 US City-St-Zip: Title: TRES () Delete Title: Name: JONES, DAVID C Name: JONES, VERONICA M Name: JONES, VERONICA M Name: JONES, VERONICA M Name: JONES, DAVID C Name: JONES, VERONICA M Na			103
JONES, DAVID C 1320-103 HENDRIX ROAD TALLAHASSEE, FL 32301 US The above named entity submits this statement for the purpose of changing its registered office or register in the State of Florida. SIGNATURE: Cold/28/20	FEI Number:	: 02-0809216 FEI Number Applied For () F	El Number Not Applicable () Certificate of Status Desired ()
1320-103 HENDRIX ROAD	Name and	Address of Current Registered Agent:	Name and Address of New Registered Agent:
in the State of Florida. SIGNATURE:	1320-103 H	HENDRIX ROAD	1320 HENDRIX ROAD 103
Election Campaign Financing Trust Fund Contribution (). OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS Title: PRES () Delete Title: () Change () Additional Address: 1320-103 HENDRIX ROAD () A			ose of changing its registered office or registered agent, or both
Election Campaign Financing Trust Fund Contribution (). OFFICERS AND DIRECTORS: Title: PRES () Delete Title: () Change () Additional Address: 1320-103 HENDRIX ROAD Address: 1320-10	SIGNATUR	RE:	04/28/2009
OFFICERS AND DIRECTORS: Title: PRES () Delete Title: () Change () Additional Address: 1320-103 HENDRIX ROAD (15y-St-Zip: TALLAHASSEE, FL 32301 US		Electronic Signature of Registered Agent	Date
Title: PRES () Delete Title: () Change () Additional Address: 1320-103 HENDRIX ROAD Address: 1320-103 HENDRIX ROAD Address: City-St-Zip: TALLAHASSEE, FL 32301 US City-St-Zip: Title: TRES () Delete Title: () Change () Additional Address: 1320-103 HENDRIX ROAD Address: 1320-103 HENDRIX ROAD Address: City-St-Zip: TALLAHASSEE, FL 32301 US City-St-Zip: TALLAHASSEE, FL 32301 US City-St-Zip: Title: SECT () Delete Title: () Change () Additional Address: 1320-103 HENDRIX ROAD Address: 1320-103 HENDRIX ROAD Address: City-St-Zip: TALLAHASSEE, FL 32301 US City-St-Zip: Title: DIR () Delete Title: () Change () Additional Address: 1320-103 HENDRIX ROAD Address: City-St-Zip: TALLAHASSEE, FL 32301 US City-St-Zip: Title: DIR () Delete Title: () Change () Additional Address: 1320-103 HENDRIX ROAD Ad	Election Car	mpaign Financing Trust Fund Contribution ().	
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	Name: Address:	JONES, VERONICA M 1320-103 HENDRIX ROAD	Name: Address:

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 C. JONES PRES 04/28/2009