## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P07000064636

Address: City-St-Zip:

PORT CHARLOTTE, FL 33952

FILED Sep 03, 2008 Secretary of State

Entity Name: DC HOME AUDIO, INC. **Current Principal Place of Business: New Principal Place of Business:** 119 PALMETTO CIRCLE PORT CHARLOTTE, FL 33952 **Current Mailing Address: New Mailing Address:** 119 PALMETTO CIRCLE 119 PALMETTO CIRCLE NE PORT CHARLOTTE, FL 33952 PORT CHARLOTTE, FL 33952 FEI Number: 26-0277318 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: WILSON, DAVID A WILSON, BRADLEY L 119 PALMETTO CIRCLE NE 119 PALMETTO CIRCLE PORT CHARLOTTE, FL 33952 US PORT CHARLOTTE, FL 33952 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: BRADLEY L. WILSON 09/03/2008 Electronic Signature of Registered Agent Date In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: PSTD () Delete () Change () Addition WILSON, DAVID A Name: Name: 119 PALMETTO CIRCLE Address: Address: City-St-Zip: PORT CHARLOTTE, FL 33952 City-St-Zip: Title: () Delete Title: () Change () Addition WILSON, BRADLEY L Name: Name: 119 PALMETTO CIRCLE Address: Address: PORT CHARLOTTE, FL 33952 City-St-Zip: City-St-Zip: Title: Title: () Delete () Change () Addition WILSON, DARLA M Name: Name: 119 PALMETTO CIRCLE 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.

City-St-Zip:

SIGNATURE: BRADLEY L. WILSON VD 09/03/2008