2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000076125

Entity Name: DESIGNATED DRIVER AIRPORT SHUTTLE SERVICE, INC

FILED Feb 21, 2008 Secretary of State

FL

FL

Current Principal Place of Business:	New Principal Place of Business
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27249 PULLEN AVENUE 12901 KENTFIELD LANE B-2 FORT MYERS, FL 33913

BONITA SPRINGS, FL 34135 FL

Current Mailing Address: New Mailing Address:

27249 PULLEN AVENUE 12901 KENTFIELD LANE

B-2 FORT MYERS, FL 33913 BONITA SPRINGS, FL 34135 FL

FEI Number: 35-2302120 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:

BUGG, TERENCE D MOORE, KIMBERLY A
27249 PULLEN AVENUE 12901 KENTFIELD LANE
UNIT B-2 FORT MYERS, FL 33913 US
BONITA SPRINGS, FL 34135 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: KIMBERLY A. MOORE 02/21/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: () Change () Addition

 Name:
 BUGG, TERENCE D
 Name:

 Address:
 27249 PULLEN AVENUE, UNIT B-2
 Address:

 City-St-Zip:
 BONITA SPRINGS, FL 34135 US
 City-St-Zip:

Title: VP () Delete Title: VP (X) Change () Addition

Name:MOORE, KIMBERLY AName:MOORE, KIMBERLY AAddress:5572 LAGO VILLAGGIO WAYAddress:12901 KENTFIELD LANECity-St-Zip:NAPLES, FL 34104 USCity-St-Zip:FORT MYERS, FL 33913 US

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: KIMBERLY A. MOORE VP 02/21/2008