

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000097065

Entity Name: DRAGONFLY OF OCALA INC

FILED
Feb 17, 2009
Secretary of State

Current Principal Place of Business:

114 SE 1ST ST STE 2
GAINESVILLE, FL 32601

New Principal Place of Business:

114 SE 1ST ST
STE 2
GAINESVILLE, FL 32601

Current Mailing Address:

114 SE 1ST STREET STE 2
GAINESVILLE, FL 32601

New Mailing Address:

114 SE 1ST STREET
STE 2
GAINESVILLE, FL 32601

FEI Number: 26-0807789

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LUCKEY, CAM
4045 NW 43RD ST
STE.A
GAINESVILLE, FL 32606 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: LEUNG, HIROFUMI
Address: 1534 NW 54 DRIVE
City-St-Zip: GAINESVILLE, FL 32605

Title: VP () Delete
Name: KIM, SONG Y
Address: 2636 SW 35TH PL. #20
City-St-Zip: GAINESVILLE, FL 32608

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: HIROFUMI LEUNG

P

02/17/2009

Electronic Signature of Signing Officer or Director

Date