

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000125363

Entity Name: DOUGH TO DOUGH INC.

FILED  
Apr 30, 2009  
Secretary of State

## Current Principal Place of Business:

9825 SAN JOSE BLVD. SUITE 30  
JACKSONVILLE, FL 32257

## New Principal Place of Business:

## Current Mailing Address:

9825 SAN JOSE BLVD. SUITE 30  
JACKSONVILLE, FL 32257

## New Mailing Address:

FEI Number: 26-1438501

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MOKSNES, SHAWN D  
1589 B. OLD MOULTRIE RD.  
ST. AUGUSTINE, FL 32084 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: MOKSNES, DEAN T  
Address: 6 B LISBON STREET  
City-St-Zip: ST. AUGUSTINE, FL 32080 US

Title: VP ( ) Delete  
Name: MOKSNES, GALEN  
Address: 6860 137TH AVE NW  
City-St-Zip: RAMSEY, MN 55303

Title: CFO ( ) Delete  
Name: MOKSNES, SHAWN D  
Address: 10025 LIGHT AVE.  
City-St-Zip: HASTINGS, FL 32145

Title: COO ( ) Delete  
Name: PERRY, JEFFREY G  
Address: 4605 SUSAN STREET  
City-St-Zip: HASTINGS, FL 32145

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: SEC (X) Change ( ) Addition  
Name: MOKSNES, SHAWN D  
Address: 10025 LIGHT AVE.  
City-St-Zip: HASTINGS, FL 32145

Title: TRE (X) Change ( ) Addition  
Name: PERRY, JEFFREY G  
Address: 4605 SUSAN STREET  
City-St-Zip: HASTINGS, FL 32145

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: SHAWN MOKSNES

SEC

04/30/2009

Electronic Signature of Signing Officer or Director

Date