## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000035051

Entity Name: DOUGLAS FAMILY PROCESS INC.

FILED Apr 27, 2009 Secretary of State

**Current Principal Place of Business:** New Principal Place of Business: 9748 CYPRESS POND AVE 234 PEBBLE BEACH BLVD TAMPA, FL 33647 308 NAPLES, FL 34113 **Current Mailing Address: New Mailing Address:** 9748 CYPRESS POND AVE 234 PEBBLE BEACH BLVD TAMPA, FL 33647 308 NAPLES, FL 34113 US FEI Number: 26-2340060 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: DOUGLAS, CHADWICK B DOUGLAS, CHADWICK B 9748 CYPRESS POND AVE 234 PEBBLE BEACH BLVD TAMPA, FL 33647 308 NAPLES, FL 34113 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: CHADWICK DOUGLAS 04/27/2009 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete Title: (X) Change ( ) Addition DOUGLAS, CHADWICK B DOUGLAS, CHADWICK B Name: Name: 9748 CYPRESS POND AVE 234 PEBBLE BEACH BLVD #308 Address: Address: City-St-Zip: TAMPA, FL 33647 US City-St-Zip: NAPLES, FL 34113 US VΡ Title: Title: () Delete () Change () Addition Name: DOUGLAS, LARRY B Name: 9748 CYPRESS POND AVE Address: Address: TAMPA, FL 33647 US City-St-Zip: City-St-Zip: Title: (X) Change ( ) Addition Title: ( ) Delete VΡ DOUGLAS, CHADWICK B MCDONALD, AMELIA B Name: Name: 234 PEBBLE BEACH BLVD #308 9748 CPRESS POND AVE Address Address: City-St-Zip: TAMPA, FL 33647 US City-St-Zip: NAPLES, FL 34113 US Title: () Delete Title: MGR ( ) Change (X) Addition COTTON, JOSHUA Name: Name: Address: Address: 234 PEBBLE BEACH BLVD City-St-Zip: City-St-Zip: NAPLES, FL 34113 US Title: Title: ( ) Change (X) Addition ( ) Delete DOUGLAS, JUDY M Name: Name: Address: Address: 9748 CYPRESS POND AVE City-St-Zip: City-St-Zip: TAMPA, FL 34667 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: CHADWICK DOUGLAS P 04/27/2009