

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000038229

FILED
Jun 16, 2009
Secretary of State

Entity Name: D.E. CONSTRUCTION ENTERPRISES, INC.

Current Principal Place of Business:

26646 FISHERMANS ROAD
PAISLEY, FL 32767

New Principal Place of Business:

41929 PINE VALLEY DR.
PAISLEY, FL 32767

Current Mailing Address:

26646 FISHERMANS ROAD
PAISLEY, FL 32767

New Mailing Address:

41929 PINE VALLEY DR.
PAISLEY, FL 32767

FEI Number: 26-2787222

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NORMAN, BENJAMIN M
26646 FISHERMANS ROAD
PAISLEY, FL 32767 US

Name and Address of New Registered Agent:

NORMAN, BENJAMIN M
41929 PINE VALLEY DR.
PAISLEY, FL 32767 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: BENJAMIN M NORMAN

06/16/2009

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:

Title: PRES () Delete
Name: NORMAN, BENJAMIN
Address: 26646 FISHERMANS ROAD
City-St-Zip: PAISLEY, FL 32767

Title: VP () Delete
Name: NORMAN, TIM
Address: 41929 PINE VALLEY DR.
City-St-Zip: PAISLEY, FL 32767

Title: VP () Delete
Name: NORMAN, RYAN
Address: 41929 PINE VALLEY DR.
City-St-Zip: PAISLEY, FL 32767

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: NORMAN, BENJAMIN
Address: 41929 PINE VALLEY DR.
City-St-Zip: PAISLEY, FL 32767

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: BENJAMIN M NORMAN

PRES

06/16/2009

Electronic Signature of Signing Officer or Director

Date