

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000056474

FILED
Apr 23, 2009
Secretary of State

Entity Name: DUPONT INTERNATIONAL TRADE, INC.

Current Principal Place of Business:

6167 LEE ANN LANE, UNIT 3
NAPLES, FL 34109

New Principal Place of Business:

Current Mailing Address:

6167 LEE ANN LANE, UNIT 3
NAPLES, FL 34109

New Mailing Address:

28391 ALTESSA WAY
BONITA SPRINGS, FL 34135

FEI Number: 26-2759549

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COLLINSWORTH, NEAL R
6167 LEE ANN LANE, UNIT 3
NAPLES, FL 34109 US

Name and Address of New Registered Agent:

COLLINSWORTH, NEAL R
28391 ALTESSA WAY
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: NEAL R. COLLINSWORTH

04/23/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PVST () Delete
Name: COLLINSWORTH, NEAL R
Address: 6167 LEE ANN LANE, UNIT 3
City-St-Zip: NAPLES, FL 34109

Title: D () Delete
Name: COLLINSWORTH, NEAL R
Address: 6167 LEE ANN LANE, UNIT 3
City-St-Zip: NAPLES, FL 34109

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PVST (X) Change () Addition
Name: COLLINSWORTH, NEAL R
Address: 28391 ALTESSA WAY
City-St-Zip: BONITA SPRINGS, FL 34135

Title: D (X) Change () Addition
Name: COLLINSWORTH, NEAL R
Address: 28391 ALTESSA WAY
City-St-Zip: BONITA SPRINGS, FL 34135

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: NEAL R. COLLINSWORTH

D

04/23/2009

Electronic Signature of Signing Officer or Director

Date