

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000063920

Entity Name: DEACON HOLDINGS, INC.

FILED  
Apr 14, 2009  
Secretary of State

## Current Principal Place of Business:

2645 NE 9TH AVENUE  
STE 4  
CAPE CORAL, FL 33909

## New Principal Place of Business:

## Current Mailing Address:

2645 NE 9TH AVENUE  
STE 4  
CAPE CORAL, FL 33909

## New Mailing Address:

FEI Number: 26-2922715      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

KOSMALA, NICHOLAS  
323 NE 23RD TER  
CAPE CORAL, FL 33909      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: VD ( ) Delete  
Name: KOSMALA, NICHOLAS  
Address: 323 NE 23RD TER  
City-St-Zip: CAPE CORAL, FL 33909

Title: P ( ) Delete  
Name: KOSMALA, JIMMY  
Address: 7121 VIA COLINA  
City-St-Zip: SAN JOSE, CA 95139

## 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: NICHOLAS KOSMALA

VD

04/14/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date