

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000075639

FILED
Apr 30, 2012
Secretary of State

Entity Name: DEPENDABLE MOBILITY, INC.

Current Principal Place of Business:

514 CANDLEWOOD LN.
CRESTVIEW, FL 32539

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 627
MONTICELLO, FL 32345 US

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILSON, CHRISTOPHER L
514 CANDLEWOOD LN.
CRESTVIEW, FL 32539 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

OFFICERS AND DIRECTORS:

Title: PTS
Name: WILSON, CHRISTOPHER L
Address: 514 CANDLEWOOD LN.
City-St-Zip: CRESTVIEW, FL 32539

I hereby 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 all other like empowered.

SIGNATURE: CHRISTOPHER L WILSON

MR

04/30/2012

Electronic Signature of Signing Officer or Director

Date