2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P2958
1. Entity Name
DIMENSION DEVELOPMENT
LOUISIANA



Principal Place of Business

401 KEYSER AVE NATCHITOCHES, LA 71457 Mailing Address

COMPANY, INC. OF

P.O. BOX 7100 NATCHITOCHES, LA 71457

FILED Apr 20, 2007 08:00 A Secretary of State



DO	NOT	WRITE	IN TH	IIS :	SPACE
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CR2E034 (11/05) 03292007 No Chg-P

4. FEI Number 72-1127122

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION, FL 33324

SIGNATURE:

DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.									
SIGNATURE									
	Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE								
		 Election Campaign Finan Trust Fund Contribution. 	cing	\$5.00 May Be Added to Fees					
10.	OFFICERS AND DIREC	CTORS							
NAME STREET ADDRESS CITY-SI-ZIP	P FRIEDMAN, GREGORY 401 KEYSER AVE. NATCHITOCHES, LA 71457								
TITLE NAME STREET ADDRESS CITY-ST-ZIP	COB TURNER, JOHN S., JR. 820 GARRETT DRIVE BOSSIER CITY, LA 71111								
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S MANCIL, BOBBY R 401 KEYSER AVE NATCHITOCHES, LA 71457			DO	NOT WRITE				
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN	THIS SPACE				
TITLE NAME STREET ADDRESS CITY-ST-ZIP			:		•				
TITLE NAME STREET ADDRESS CITY-ST-ZIP			,		000000720274 - 05/01/07-80098-005 150.00				
12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an affaction or the receiver or trustee empowered in the empowered.									

OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR