

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000004948

Entity Name: DDP INVESTMENTS, INC.

FILED
Mar 08, 2004
Secretary of State

Current Principal Place of Business:

11 A. MAX BREWER PKWY
SUITE B
TITUSVILLE, FL 32796

New Principal Place of Business:

4420 SOUTH WASHINGTON AVENUE
TITUSVILLE, FL 32780

Current Mailing Address:

11 A. MAX BREWER PKWY
SUITE B
TITUSVILLE, FL 32796

New Mailing Address:

4420 SOUTH WASHINGTON AVENUE
TITUSVILLE, FL 32780

FEI Number: 59-3220928

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MAHONEY, TIMOTHY
11 A MAX BREWER PARKWAY
STE B
TITUSVILLE, FL 32796

Name and Address of New Registered Agent:

MAHONEY, TIMOTHY
4420 SOUTH WASHINGTON AVENUE
TITUSVILLE, FL 32780

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:

03/08/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MAHONEY, TIMOTHY
Address: 11 A MAX BREWER PARKWAY
City-St-Zip: TITUSVILLE, FL 32796

Title: T () Delete
Name: PORTER, VIRGINIA
Address: 11 A. MAX BREWER PKWY SUITE B
City-St-Zip: TITUSVILLE, FL 32796

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MAHONEY, TIMOTHY
Address: 4420 SOUTH WASHINGTON AVENUE
City-St-Zip: TITUSVILLE, FL 32780

Title: T (X) Change () Addition
Name: PORTER, VIRGINIA
Address: 4420 SOUTH WASHINGTON AVENUE
City-St-Zip: TITUSVILLE, FL 32780

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: TIMOTHY MAHONEY

P

03/08/2004

Electronic Signature of Signing Officer or Director

Date