

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000054440

Entity Name: DEAN ENTERPRISES, INC.

FILED  
Apr 10, 2008  
Secretary of State

## Current Principal Place of Business:

290 LAWRENCE BLVD  
KEYSTONE HEIGHTS, FL 32656 US

## New Principal Place of Business:

## Current Mailing Address:

P.O. BOX 2180  
KEYSTONE HEIGHTS, FL 32656 US

## New Mailing Address:

P.O. BOX 1569  
KEYSTONE HEIGHTS, FL 32656 US

FEI Number: 59-3261736

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PHILIP T. DEAN  
6461 BAKER OAD  
KEYSTONE HEIGHTS, FL 32656 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: PD ( ) Delete  
Name: DEAN, PHILIP THOMAS  
Address: 6461 BAKER ROAD  
City-St-Zip: KEYSTONE HEIGHTS, FL

Title: STD ( ) Delete  
Name: LAURA G. DEAN,  
Address: 6461 BAKER RD.  
City-St-Zip: KEYSTONE HEIGHTS, FL

Title: D ( ) Delete  
Name: DEAN, RHETT C  
Address: 661 LEE CR 2038  
City-St-Zip: NOTASULGA, AL 36866

Title: D ( ) Delete  
Name: DEAN, JUSTIN C  
Address: 1392 CR 21 B  
City-St-Zip: MELROSE, FL 32666

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: DEAN, JUSTIN C  
Address: 400 FLOYD ST.  
City-St-Zip: GREEN COVE SPRINGS, FL

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: LAURA G. DEAN

STD

04/10/2008

Electronic Signature of Signing Officer or Director

Date