

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000000799

Entity Name: DAWNTINA PROPERTIES, INC.

FILED
Mar 19, 2005
Secretary of State

Current Principal Place of Business:

6090 SEMINOLE BLVD
SEMINOLE, FL 34642

New Principal Place of Business:

Current Mailing Address:

6090 SEMINOLE BLVD
SEMINOLE, FL 34642

New Mailing Address:

8196 COACHLIGHT CIRCLE
SEMINOLE, FL 33776

FEI Number: 65-0551894

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OLIVIERI, SALVATORE A
6090 SEMINOLE BLVD
SEMINOLE, FL 33772 US

Name and Address of New Registered Agent:

OLIVIERI, SALVATORE A
8196 COACHLIGHT CIRCLE
SEMINOLE, FL 33776 US

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

03/19/2005

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: OLIVIERI, SALVATORE A
Address: 6090 SEMINOLE BLVD
City-St-Zip: SEMINOLE, FL 33772

Title: D () Delete
Name: OLIVIERI, NANCY C
Address: 6090 SEMINOLE BLVD
City-St-Zip: SEMINOLE, FL 33772

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: OLIVIERI, SALVATORE A
Address: 8196 COACHLIGHT CIRCLE
City-St-Zip: SEMINOLE, FL 33776

Title: D (X) Change () Addition
Name: OLIVIERI, NANCY C
Address: 8196 COACHLIGHT CIRCLE
City-St-Zip: SEMINOLE, FL 33776

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: OLIVIERI, NANCY C.

Electronic Signature of Signing Officer or Director

D

03/19/2005

Date