2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 06, 2005
Secretary of State

DOCUMENT# P95000006957

Entity Name: DLD SERVICES, INC. OF LAKE CITY

Current Principal Place of Business:

3322 US 90 WEST
LAKE CITY, FL 32055

New Principal Place of Business:

Current Mailing Address:

3322 US 90 WEST
LAKE CITY, FL 32055

New Mailing Address:

FEI Number: 59-3283603 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DELAND, DARWIN L JR
RTE 3, BOX 114
LAKE CITY, FL 32025 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: DELAND, DARWIN L JR
Address: RTE 3, BOX 114
City-St-Zip: LAKE CITY, FL 32025

Title: VD ( ) Delete
Name: DELAND, PAMELA S
Address: RT. 3 BOX 114
City-St-Zip: LAKE CITY, FL 32025

Title: TD ( ) Delete
Name: BUCHANAN, CLAYTON
Address: P.O. BOX 118
City-St-Zip: O'BRIEN, FL 32071

Title: SD ( ) Delete
Name: DELAND, DARWIN L III
Address: RT. 3 BOX 114
City-St-Zip: LAKE CITY, FL 32025

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

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: DARWIN L DELAND JR PD 02/06/2005

Electronic Signature of Signing Officer or Director Date