2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P95000080642

Entity Name: DAWJONCOURT, INC.

FILED Nov 29, 2005 Secretary of State

Certificate of Status Desired ()

Current Principa	al Place of Business:	New Principal Place of Business:

199 HICKMAN DRIVE 1920 BOOTHE CIRCLE

SUITE 2001 SUITE 110

SANFORD, FL 32771 US LONGWOOD, FL 32750 US

Current Mailing Address: New Mailing Address:

199 HICKMAN DRIVE P O BOX 1952

FEI Number Applied For ()

SUITE 2001 WINTER PARK, FL 32790 US

SANFORD, FL 32771 US

FEI Number Not Applicable ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

PRATT, JAMES R ESQ.
369 N. NEW YORK AVE. 3RD. FLOOR
LOWMAN, WILLIAM R JR.ESQ.
SHUFFIELD LOWMAN

WINTER PARK, FL 32789 US 1000 LEGION PLACE, SUITE 1700 ORLANDO, FL 32801 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: WILLIAM R LOWMAN, JR. 11/29/2005

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

FEI Number: 65-0625624

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PDT () Delete Title: PDT (X) Change () Addition

 Name:
 HALL, JON M SR
 Name:
 HALL, JON M SR

 Address:
 1100 S ATLANTIC AVENUE
 Address:
 910 N PENINSULA AVE

City-St-Zip: NEW SMYRNA BEACH, FL 32169 US City-St-Zip: NEW SMYRNA BEACH, FL 32169 US

Title: VPSD () Delete Title: () Change () Addition

 Name:
 DYKES, SUSAN
 Name:

 Address:
 212 E LAKE VICTORIA CIRCLE
 Address:

City-St-Zip: DELAND, FL 32724 City-St-Zip:

Title: D () Delete Title: () Change () Addition Name: HALL, JR., JON M Name:

Address: 211 ORANGE TERRACE DRIVE Address:
City-St-Zip: WINTER PARK, FL 32789 City-St-Zip:

Title: D () Delete Title: () Change () Addition

 Name:
 HALL, JAMES C
 Name:

 Address:
 225 OLD SANFORD OVIEDO ROAD
 Address:

 City-St-Zip:
 WINTER SPRINGS, FL 32708
 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: SUSAN S DYKES VP 11/29/2005