

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 11, 2008 08:00 A
Secretary of State

DOCUMENT # P96000010839 1. Entity Name D & D REPORTING SERVICE, INC.	
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Principal Place of Business 915 CHESTNUT STREET CLEARWATER, FL 33756	Mailing Address 915 CHESTNUT STREET CLEARWATER, FL 33756
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DO NOT WRITE IN THIS SPACE



01212008 No Chg-P CR2E034 (11/05)

4. FEI Number 59-3360749	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent HERROLD, DENISE A 915 CHESTNUT STREET CLEARWATER, FL 34616	DO NOT WRITE IN THIS SPACE
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8. 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. I am familiar with, and accept the obligations of registered agent.

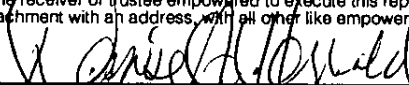
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	000000892234 04/23/08-80058-007 150.00
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P HERROLD, DENISE A 915 CHESTNUT STREET CLEARWATER, FL 33756
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP HERROLD, NED E 915 CHESTNUT STREET CLEARWATER, FL 33756
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**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: 

Signature and Typed or Printed Name of Signing Officer or Director
Denise A. Herrold

Date **4/9/08** Daytime Phone # **727 468 2002**