

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000081549

Entity Name: DI CREMA GROUP, INC.

FILED
Mar 26, 2009
Secretary of State

Current Principal Place of Business:

23691 COUNTY ROAD 62 N
ROBERTSDALE,, FL 36567

New Principal Place of Business:

23691 COUNTY ROAD 62 N
ROBERTSDALE,, AL 36567

Current Mailing Address:

23691 COUNTY ROAD 62 N
ROBERTSDALE,, FL 36567

New Mailing Address:

23691 COUNTY ROAD 62 N
ROBERTSDALE,, AL 36567

FEI Number: 59-3408452

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BOSTIC, ALTON M
4524 BOSTIC LANE
PACE, FL, FL 32571 US

Name and Address of New Registered Agent:

BOSTIC, ALTON M
4524 BOSTIC LANE
PACE, FL 32571 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

03/26/2009

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PTD () Delete
Name: ANDERSON, NILS B
Address: 23691 COUNTY ROAD 62 N
City-St-Zip: ROBERTSDALE,, AL 36567

Title: VD () Delete
Name: BOSTIC, ALTON M
Address: 4524 BOSTIC LANE
City-St-Zip: PACE, FL 32571

Title: VSD () Delete
Name: WATSON, CAROL G
Address: 2442 BONANZA DRIVE
City-St-Zip: CANTONMENT, FL 32533

Title: D () Delete
Name: HUBNER, RETTA
Address: 1257 TECUMSEH COURT
City-St-Zip: PENSACOLA, FL

Title: D () Delete
Name: ATALA, EDWARD R
Address: 2796 COTTONWOOD LANE
City-St-Zip: PENSACOLA, FL 32514

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: HUBNER, RETTA
Address: 1257 TECUMSEH COURT
City-St-Zip: PENSACOLA, FL 32514

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

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: NILS B. ANDERSON

Electronic Signature of Signing Officer or Director

PTD

03/26/2009

Date