2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

## FILED Feb 07, 2005 08:00 AM DOCUMENT # P97000000231 **Secretary of State** 1. Entity Name DONALD R. DUGGER, P.E., P.A. Principal Place of Business Mailing Address 1210 CARDINAL LANE 1210 CARDINAL LANE DELAND FL 32720 DELAND FL 32720 2. Principal Place of Business 3. Mailing Address Suite Apt # etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/04) Applied For City & State City & State 4. FEI Number 59-3422432 Not Applicable Zia Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name EARLY, CHARLES L JR. Street Address (P.O. Box Number is Not Acceptable) TAYLOR AND EARLY, P.A. 112 NORTH FLORIDA AVENUE DELAND FL 32720 City Zip Code 9. 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 Signature, typed or printed name of registered agent and title 1 applicable DATE (NOTE Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. Electron Campaign Financing \$5.00 May Be After May 1, 2005 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. 10. Addition THE Delete TITLE DUGGER, DONALD R NAME NAME 1210 CARDINAL LANE STREET ADDRESS STREET ADDRESS DELAND FL 32720 CHY-SI-ZIP CITY-ST-7IP Change ☐ Addition Delete TOTALE NAME NAME STREET ADDRESS STREET ADDRESS CITY ST-ZIP CITY-ST-ZIP ☐ Change Addition Delete DREE NAME NAME STREET ADDRESS STREET ADDRESS CITY - ST - ZIP CITY ST-ZIP ☐ Change ☐ Addition Delete TITLE U00000218131 02/07/05-80054-003 150.00 NAME NAME. STREET ADDRESS STREET ADDRESS CUTY-ST-ZIP CHY-ST-ZIP ☐ Addition Change ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition Delete THILE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify 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 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: Donald R. Dugger 04 Febos (386) 734-9921