2008 FOR PROFIT CORPORATION ANNUAL REPORT

ANNUAL REPORT

DOCUMENT # P97000025540

1. Entity Name

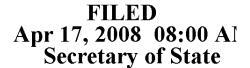
DAVE'S PUMP AND SPRINKLER SYSTEMS, INC. OF VOLUSIA COUNTY



320 COUNTRY CIRCLE DRIVE EAST DAYTONA BEACH, FL 32124-6611

Principal Place of Business

Mailing Address 1539 CENTER AVENUE HOLLY HILL, FL 32117-2021





CR2E034 (11/05)

	DO	NOT	WRITE	IN THIS	SPACE
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4. FEI Number
59-3450780

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MASTERS, JOHN M 1539 CENTER AVENUE HOLLY HILL, FL 32117-2021

DO NOT WRITE IN THIS SPACE

No Chg-P

01312008

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 Signature. It poed or printed name of registered agent and title if applicable (NOTE, Registered Agent signature required when reinstating) DATE									
	E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.00	9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees							
10.	OFFICERS AND DIREC	TORS	•						
TITLE	PD	• • •							
NAME	SMITH, DAVID L		•						
STREET ADDRESS	320 COUNTRY CIRCLE DRIVE EAST								
CITY-ST-ZIP	DAYTONA BEACH, FL 321246611								
TITLE	STD								
NAME	SMITH, BARBARA A				11000000000000				
STREET ADDRESS	320 COUNTRY CIRCLE DRIVE EAST				04/29/03-80100-004 150.00				
CITY-ST-ZIP	DAYTONA BEACH, FL 321246611				644 774 00 00100 004 130:00				
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE				
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TITLE NAME				IN "	THIS SPACE				
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CITY ST-ZIP									
TITLE									
NAME		,							
STREET ADDRESS									
CITY-ST-ZIP									
12. I hareby 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 giver like empowered.									

Barbara Smith) 4/11/08