

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000079182

FILED
Jan 25, 2008
Secretary of State

Entity Name: DEVELOPMENT ACCOUNTING SERVICES, INC.

Current Principal Place of Business:

1303 JASMINE STREET, STE 104L
FERNANDINA BEACH, FL 32034

New Principal Place of Business:

Current Mailing Address:

1303 JASMINE STREET, STE 104L
FERNANDINA BEACH, FL 32034

New Mailing Address:

FEI Number: 65-0810096

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BODIN, LILLIE E
1303 JASMINE STREET, STE 104L
FERNANDINA BEACH, FL 32034 US

Name and Address of New Registered Agent:

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

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPS () Delete
Name: BODIN, LILLIE E
Address: 711 S. OSPREY AVE., STE. # 1
City-St-Zip: SARASOTA, FL 34236

Title: T () Delete
Name: BODIN, DON
Address: 711 S. OSPREY AVE., STE. # 1
City-St-Zip: SARASOTA, FL 34236

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPS (X) Change () Addition
Name: BODIN, LILLIE E
Address: 1303 JASMINE ST. # 104L
City-St-Zip: FERNANDINA BEACH, FL 32034

Title: T (X) Change () Addition
Name: BODIN, DON
Address: 1303 JASMINE ST. # 104L
City-St-Zip: FERNANDINA BEACH, FL 32036

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: LILLIE E. BODIN

DPS

01/25/2008

_____ Electronic Signature of Signing Officer or Director

_____ Date