2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 19, 2005 8:00 am ate

Secretary	of Sta
04-19-2005 90394	

DOCUI 1. Entity Nam DBSB 2, I		2381					04-19-2005 9	0 3 94 014	‡ ***150	.00
Principal Place	e of Business	Mailing Address						5	0038	Man
3740 BEACH	BLVD	3740 BEACH BLVD							0039	787
SUITE 300	F FL 22207	SUITE 300								
JACKSUNVILL	E, FL 32207	JACKSONVILLE, FL 32	207			118 (13 (13 (14 (14 (14 (14 (14 (14 (14 (14 (14 (14	ER HIR TO BE HE BOTTO BRITE BUT I		50	## ## ################################
2. Principal Place of Business		3. Mailing Address								
Suite, Apt. #, etc.		Suite, Apt. #, etc.			04152005	Chg-P	CR2E0	34 (10/03)		
City & State		City & State			4. FEI Number 59-3481				oplied For ot Applicable	
Zip	Country	Zip	Country			-	of Status Desired		\$8.75 Add	ditional
	6. Name and Address of Current	Registered Agent	<u> </u>			7. Name and	Address of New Ro	egistered A	gent	
·				Name						
DEMETREE, J C JR 3740 BEACH BLVD				Street Address (P.O. Box Number is Not Acceptable)						
SUITE 300 JACKSON	VILLE, FL 32207									
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			City					Zip Code	
								FL	1	
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, typed 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, 2005 Fee will be \$550.	9. Election Campa Trust Fund Con		ncing		00 May Be ed to Fees				
10.	OFFICERS AND	DIRECTORS	11.			ADDITIONS/	CHANGES TO OFFI	CERS AND	DIRECTOR	S IN 11
TITLE	PT IS IS	☐ Delete	TITL		PTD				x Change	Addition
NAME STREET ADDRESS	DEMETREE, J.C. JR. 3740 BEAHC BLVD., STE 300		NAM	et address		Demetree, J Beach Blvd				
CITY-ST-ZIP	JACKSONVILLE, FL 32207			-ST-ZIP		sonville, FL				
DILE	VPST	☐ Delete	TITU	F	VPS				Change	Addition
NAME	DEMETREE, MARK C.	5 55700	NAM			C. Demetre			onlings	
STREET ADDRESS	3740 BEACH BLVD., STE 300		STRE	ET ADDRESS		Beach Blvd				
CITY-ST-ZIP	JACKSONVILLE, FL 32207		CITY	-ST-ZIP		sonville, FL	32207			
TITLE	VPAS	☐ Delete	TITL		VPA				Change	Addition Addition
NAME STREET ADDRESS	DEMETREE, CHRISTOPHER C. 3740 BEACH BLVD., STE 300		NAM	ET ADDRESS		stopher C. D Beach Blvd				
CITY-ST-ZIP	JACKSONVILLE, FL 32207			-ST-ZIP		sonville, FL	.,			
TITLE	VPAS	☐ Defete							☐ Change	☐ Addition
NAME	DUNN, M. HARRIS		NAM	1						
STREET ADDRESS	3740 BEACH BLVD., STE 300			ET ADDRESS						
CITY - ST - ZIP	JACKSONVILLE, FL 32207		CITY	+ST+ZiP						
TITLE	CEO	Delete	TITL		CEO				Change	Addition
NAME STREET ADDRESS	DEMETREE, JACK C. 3740 BEACH BLVD., STE 300		NAM	EET ADDRESS		C. Demetre Beach Blvd				
CITY-ST-ZIP	JACKSONVILLE, FL 32207			-ST-ZIP		sonville, FL				
TITLE		☐ Delete	TITL	E					☐ Change	☐ Addition
NAME			NAM)E						
STREET ADDRESS				EET ADDRESS						•
CITY-ST-ZIP				-ST-ZIP	L					
indicated	certify that the information supplied with on this report or supplemental report is	i usis using does not qualify to s true and accurate and that	or the exe my signa	imption stat ture shall h	ec in Se ave the :	cuon 119.07(3)(i same legal effect), riorida Statutes. I Las if made under d	rurther cert	ITY that the in	ntormátion or director

indicated on this report or supplierrental report is true and accurate and that my signature shall have the same legal enect as it 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 mother like empowered.

SIGNATURE: _

SIGNATURE AND TYPED OR PRINTED MAKE OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #