2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000107351

Entity Name: DGP, INC.

FILED Apr 18, 2005 Secretary of State

Current Principal Place of Business: New P	rincipal Place of Business:
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2020 SPRING LANDING BLVD. 1031 W. MORSE BLVD. LONGWOOD, FL 32779

SUITE 140

WINTER PARK, FL 32789

Current Mailing Address: New Mailing Address:

1031 W. MORSE BLVD. 2020 SPRING LANDING BLVD. SUITE 140 LONGWOOD, FL 32779

WINTER PARK, FL 32789

FEI Number: 59-3485810 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of New Registered Agent: Name and Address of Current Registered Agent:

PAPE, DAVID G PAPE, DAVID G 1031 W. MORSE BLVD. 2020 SPRINGS LANDING BLVD

LONGWOOD, FL 32779 SUITE 140 WINTER PARK, FL 32789 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: 04/18/2005

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: (X) Change () Addition () Delete Title:

PAPE, DAVID G Name: Name: PAPE, DAVID G

2020 SPRING LANDING BLVD. 1031 W. MORSE BLVD. STE. 140 Address: Address: City-St-Zip: LONGWOOD, FL 32779 City-St-Zip: WINTER PARK, FL 32789

Title: DVP (X) Delete Title: () Change () Addition

Name: PAPE, LORI D Name:

2020 SPRINGS LANDING BLVD Address: Address: LONGWOOD, FL 32779 City-St-Zip: City-St-Zip:

Title: Title: () Delete () Change () Addition

PAPE, ROBERT Name: Name: NC73 RR1 Address: Address: City-St-Zip: NEWPORT, NE 68759 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: DAVID G. PAPE **DPS** 04/18/2005