

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000009991

FILED
Apr 30, 2008
Secretary of State

Entity Name: DOVE BLUEPRINTING & SERVICES, INC.

Current Principal Place of Business:

802 SW IVANHOE DRIVE
PORT ST LUCIE, FL 34983

New Principal Place of Business:

810 SW IVANHOE DRIVE
PORT ST LUCIE, FL 34983

Current Mailing Address:

802 SW IVANHOE DRIVE
PORT ST LUCIE, FL 34983

New Mailing Address:

7865 SE CR255
LEE, FL 32059

FEI Number: 65-0803092

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CUTHRELL, JOHN C
802 SW IVANHOE DRIVE
PORT ST LUCIE, FL 34983 US

Name and Address of New Registered Agent:

CUTHRELL, JOHN C
810 SW IVANHOE DRIVE
PORT ST LUCIE, FL 34983 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:

04/30/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PDC () Delete
Name: CUTHRELL, JOHN C
Address: 802 SW IVANHOE DRIVE
City-St-Zip: PORT ST LUCIE, FL 34983

Title: VTSD () Delete
Name: CUTHRELL, GAYLENE A
Address: 802 SW IVANHOE DRIVE
City-St-Zip: PORT ST LUCIE, FL 34983

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PDC (X) Change () Addition
Name: CUTHRELL, JOHN C
Address: 810 SW IVANHOE DRIVE
City-St-Zip: PORT ST LUCIE, FL 34983

Title: VTSD (X) Change () Addition
Name: CUTHRELL, GAYLENE A
Address: 810 SW IVANHOE DRIVE
City-St-Zip: PORT ST LUCIE, FL 34983

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: GAYLENE A CUTHRELL

VP

04/30/2008

Electronic Signature of Signing Officer or Director

Date