FILED
Mar 28, 2002 8:00 am
Secretary of State

03-28-2002 90002 001 ***150.00

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DO NOT WRITE IN THIS SPACE

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000012811

1. Entity Name

DDR & ASSOCIATES, INC,

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2. Principal Place of Business	3. Mailing Address
7115 DORMANY LOOP	7115 DORMANY LOOP
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: PLANT CITY, FL	City & State: PLANT CITY, FL
Zip: 33565 Country: U.S.	Zip: 33565 Country: U.S.

4. FEI Number: 59-3498861 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

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7. Name and Address of Current Registered Agent

Name: DENNIS D. ROGERS

Street Address (P.O. Box Number is Not Acceptable): 7115 DORMANY LOOP

City: PLANT CITY, FL Zip Code: 33565

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.

SIGNATURE: Dennis D. Rogers Dennis D. Rogers, President 02/28/02

Signature, typed or printed name of registered agent and date if applicable. (NOTE: Registered Agent signature required when reinstating.) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

January 1 - May 1 Fee is $150.00
After May 1, Fee is $550.00
Amended UBR is $61.25
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	President, Director
NAME	Dennis D. Rogers
STREET ADDRESS	7115 Dormany Loop
CITY-ST-ZIP	Plant City, FL 33565

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CR2E034B (12/01)

13. I hereby certify that the information supplied with this filing does not qualify 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 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE: Dennis D. Rogers 02/28/02

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

DENNIS D. ROGERS, PRESIDENT