## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P98000052353

Entity Name: DJBA, INC.

Address:

City-St-Zip:

FILED Apr 29, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 106 WEST HOWARD STREET LIVE OAK, FL 32060 **Current Mailing Address: New Mailing Address:** POST OFFICE BOX 189 LIVE OAK, FL 32064 FEI Number: 59-3519668 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: AIRTH, ADAM B JR. 500 SOUTH FLORIDA AVE. SUITE 800 LAKELAND, FL 33801 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete Title: () Change () Addition BOGGUS, CULLEN LA VOYE Name: Name: POST OFFICE BOX 66 N/A Address: Address: City-St-Zip: LIVE OAK, FL 32064 City-St-Zip: Title: STD Title: () Delete () Change () Addition BOGGUS, INA MAE Name: Name: POST OFFICE BOX 66 N/A Address: Address: LIVE OAK, FL 32064 City-St-Zip: City-St-Zip: Title: Title: () Delete ( ) Change (X) Addition Name: BOGGUS, JON Name: POST OFFICE BOX 189 N/A Address Address: City-St-Zip: City-St-Zip: LIVE OAK, FL 32064 Title: () Delete Title: ( ) Change (X) Addition BOGGUS, BART Name: Name:

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.

Address:

City-St-Zip:

POST OFFICE BOX 189

LIVE OAK, FL 32064

SIGNATURE: JON BOGGUS D 04/29/2009