

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000054492

FILED  
Mar 21, 2011  
Secretary of State

**Entity Name:** DICKSON CONSTRUCTION CONSULTING, INC.

**Current Principal Place of Business:**

7527 DUNBRIDGE DRIVE  
ODESSA, FL 33556

**New Principal Place of Business:**

**Current Mailing Address:**

7527 DUNBRIDGE DRIVE  
ODESSA, FL 33556

**New Mailing Address:**

**FEI Number:** 59-3520690

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DICKSON, JOHN L  
7527 DUNBRIDGE DRIVE  
ODESSA, FL 33556 US

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

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

**OFFICERS AND DIRECTORS:**

Title: PRES  
Name: DICKSON, JOHN L  
Address: 7527 DUNBRIDGE DRIVE  
City-St-Zip: ODESSA, FL 33556

Title: VP  
Name: DICKSON, DEBRA D  
Address: 7527 DUNBRIDGE DRIVE  
City-St-Zip: ODESSA, FL 33556

Title: OFF  
Name: DICKSON, BART  
Address: 5331 S. W. NOTCHEZ ST.  
City-St-Zip: TUALATIN, OR 97062

Title: OFF  
Name: MILLER, ANN  
Address: 1176 N. 800 E.  
City-St-Zip: OREM, UT 84097

Title: OFF  
Name: KENNEDY, HEATHER  
Address: 6825 COLLEGE COURT BLDG 10 APT 105  
City-St-Zip: DAVIE, FL 33317

Title: TREA  
Name: DICKSON, DAN  
Address: 1802 S. WINNIFRED STREET  
City-St-Zip: TACOMA, WA 98465

I hereby 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 all other like empowered.

SIGNATURE: JOHN L DICKSON

PRES

03/21/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date