

**FILED**  
**Jul 18, 2008 8:00 am**  
**Secretary of State**

07-18-2008 90014 004 \*\*\*150.00

**2008 FOR PROFIT CORPORATION  
 ANNUAL REPORT**

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                  |                                                                                                                                                                                                                                        |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>DOCUMENT # P98000077038</b><br>1. Entity Name<br><b>D &amp; M MECHANICAL, INC.</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                  |                                                                                                                                                       |
| Principal Place of Business<br><b>10251 38TH ST. NORTH<br/>         CLEARWATER, FL 33762</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | Mailing Address<br><b>10251 38TH ST. NORTH<br/>         CLEARWATER, FL 33762</b> |                                                                                                                                                                                                                                        |
| <b>DO NOT WRITE IN THIS SPACE</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                  |                                                                                                                                                                                                                                        |
| 5. Name and Address of Current Registered Agent<br><br><b>MORRISSEY, MARK<br/>         10251 38TH ST. NORTH<br/>         CLEARWATER, FL 33762</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                  | <b>DO NOT WRITE<br/>         IN THIS SPACE</b>                                                                                                                                                                                         |
| 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. I am familiar with, and accept the obligations of registered agent:<br><br>SIGNATURE _____<br><small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered agent signature required when reinstating)</small>                                                                                                                                                                                                                            |                                                                                  |                                                                                                                                                                                                                                        |
| <b>FILE NOW!!! FEE IS \$150.00<br/>         Due by September 12, 2008</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                  | 9. Election Campaign Financing<br>Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be<br/>         Added to Fees</b><br>In accordance with s. 607.193(2)(b), F.S., the<br>corporation did not receive the prior notice. |
| <b>10. OFFICERS AND DIRECTORS</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                  |                                                                                                                                                                                                                                        |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | PSD<br>MORRISSEY, MARK<br>10251 38TH ST. NORTH<br>CLEARWATER, FL 33762           |                                                                                                                                                                                                                                        |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                  |                                                                                                                                                                                                                                        |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                  |                                                                                                                                                                                                                                        |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                  |                                                                                                                                                                                                                                        |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                  |                                                                                                                                                                                                                                        |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                  |                                                                                                                                                                                                                                        |
| 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. |                                                                                  |                                                                                                                                                                                                                                        |
| <b>SIGNATURE: Mark Morrissey</b><br><small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                  |                                                                                                                                                                                                                                        |

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07112008 No Chg-P CR2E034 (11/05)

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| 4. FEI Number<br><b>59-3529091</b> | Applied For<br><input type="checkbox"/> Not Applicable |
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| 5. Certificate of Status Desired <input type="checkbox"/> | <b>\$8.75</b> Additional Fee Required |
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**DO NOT WRITE  
 IN THIS SPACE**

7/16/08

727-420-2372