

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P98000104306

Entity Name: DAE-COM, INC.

**FILED**  
**May 01, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

4613 WHISPER WAY  
PENSACOLA, FL 32504

**New Principal Place of Business:**

**Current Mailing Address:**

4613 WHISPER WAY  
PENSACOLA, FL 32504

**New Mailing Address:**

196 BOB GRAHAM RD  
SUMRALL, MS 39482

FEI Number: 59-3548791

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BROWN, DONNIE E  
4613 WHISPER WAY  
PENSACOLA, FL 32501 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: PD  
Name: ALLEN, DON H  
Address: 196 BOB GRAHAM RD  
City-St-Zip: SUMRALL, MS 39482

Title: VPD  
Name: ALLEN, ROBERT M  
Address: 196 BOB GRAHAM RD  
City-St-Zip: SUMRALL, MS 39482

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: DON H ALLEN

PD

05/01/2011

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

\_\_\_\_\_  
Date