

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P99000053909

Entity Name: D.T.T.P. INVESTMENTS, INC.

**FILED**  
**Mar 16, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

524 STOCKTON ST.  
JACKSONVILLE, FL 32204

**New Principal Place of Business:**

**Current Mailing Address:**

524 STOCKTON ST.  
JACKSONVILLE, FL 32204

**New Mailing Address:**

524 STOCKTON STREET  
JACKSONVILLE, FL 32204

FEI Number: 59-3592289

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

COLD, KATHLEEN H  
SUITE 2301, ONE INDEPENDENT DR.  
JACKSONVILLE, FL 32202 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: D  
Name: GAY, WILLIAM W  
Address: 524 STOCKTON ST.  
City-St-Zip: JACKSONVILLE, FL 32204

Title: D  
Name: GAY, ELOISE D  
Address: 524 STOCKTON ST.  
City-St-Zip: JACKSONVILLE, FL 32204

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: WILLIAM W GAY

D

03/16/2012

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

\_\_\_\_\_  
Date