

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000103486

FILED
Mar 05, 2010
Secretary of State

Entity Name: DEI HOLDINGS, INC.

Current Principal Place of Business:

1 VIPER WAY
VISTA, CA 92081

New Principal Place of Business:

Current Mailing Address:

1 VIPER WAY
C/O KC BEAN
VISTA, CA 92081

New Mailing Address:

1 VIPER WAY
C/O MICHAEL S. SIMMONS
VISTA, CA 92081

FEI Number: 65-0964171

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PCEO
Name: MINARIK, JAMES E
Address: 1 VIPER WAY
City-St-Zip: VISTA, CA 92081 US

Title: COB
Name: TEMPLETON, TROY D
Address: 550 SOUTH DIXIE HIGHWAY SUITE 300
City-St-Zip: MIAMI, FL 33146 US

Title: CFO
Name: DUFFY, KEVIN P
Address: 1 VIPER WAY
City-St-Zip: VISTA, CA 92081 US

Title: EVPS
Name: SIMMONS, MICHAEL S
Address: 1 VIPER WAY
City-St-Zip: VISTA, CA 92081 US

Title: T
Name: SACKS, LINDSAY
Address: 1 VIPER WAY
City-St-Zip: VISTA, CA 92081 US

Title: AS
Name: BIGGS, CRYSTAL L
Address: 1 VIPER WAY
City-St-Zip: VISTA, CA 92081 US

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: MICHAEL S. SIMMONS

EVPS

03/05/2010

_____ Electronic Signature of Signing Officer or Director

_____ Date