2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S50471

Current Principal Place of Business:

Entity Name: DHJ AND ASSOCIATES, INC.

FILED Apr 24, 2007 Secretary of State

284 CAMBRIDGE DR. LONGWOOD, FL 32779 US	
Current Mailing Address:	New Mailing Address:
PO BOX 161195 ALTAMONTE SPRINGS, FL 327161195 US	
FEI Number: 59-3080331 FEI Number Applied For ()	FEI Number Not Applicable () Certificate of Status Desired ()
Name and Address of Current Registered Agent:	Name and Address of New Registered Agent:
BUNSA, JAMES K. 284 CAMBRIDGE DRIVE LONGWOOD, FL 32779 US	BUNSA, JAMES K 284 CAMBRIDGE DRIVE LONGWOOD, FL 32779 US
The above named entity submits this statement for the pur in the State of Florida.	rpose of changing its registered office or registered agent, or both,
SIGNATURE: JAMES K. BUNSA	04/24/2007
Electronic Signature of Registered Agent	nt Date
Election Campaign Financing Trust Fund Contribution ().	
OFFICERS AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:
Title: D () Delete	Title: D (X) Change () Addition

New Principal Place of Business:

8104-202 BROOKGATE TER. 10421 ROSEGATE COURT, #207 Address: Address: City-St-Zip: RALEIGH, NC 27617 US City-St-Zip: RALEIGH, NC 27617 US Title: () Delete Title: () Change () Addition COVERT, HAROLD L Name: Name: Address: 653 BROAD OAK LOOP Address: LAKE FOREST, FL 32771 US City-St-Zip: City-St-Zip: Title: () Delete Title: PD () Change () Addition Name: BUNSA, JAMES K Name: 284 CAMBRIDGE DRIVE Address: Address: City-St-Zip: LONGWOOD, FL 32779 US City-St-Zip: Title: SD () Delete Title: () Change () Addition BUNSA, ANDRÉA L Name: Name: Address: 284 CAMBRIDGE DR Address: City-St-Zip: LONGWOOD, FL 32779 US City-St-Zip: Title: SD () Delete Title: () Change () Addition BUNSA, JENNIFER Name: Name: Address: 284 CAMBRIDGE DRIVE Address: LONGWOOD, FL 32779 US City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: JAMES K. BUNSA PRES 04/24/2007