

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S60849

FILED  
Apr 17, 2009  
Secretary of State

Entity Name: DWIGHT HOLE REMODELING, INC.

**Current Principal Place of Business:**

2696 TINA LANE  
MIDDLEBURG, FL 32068

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 475  
ORANGE PARK, FL 320670475

**New Mailing Address:**

FEI Number: 59-3078260      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

SANTORO, THOMAS C., ESQUIRE  
1700 WELLS ROAD  
SUITE 5  
ORANGE PARK, FL 32073 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: PD ( ) Delete  
Name: HOLE, DWIGHT  
Address: 2696 TINA LANE  
City-St-Zip: MIDDLEBURG, FL 32068

Title: D ( ) Delete  
Name: HOLE, ERIC  
Address: 7207 COUNTY ROAD 315C  
City-St-Zip: KEYSTONE HEIGHTS, FL 32656

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: DWIGHT HOLE

PRES

04/17/2009

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

\_\_\_\_\_ Date