

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S86363

FILED  
Apr 25, 2008  
Secretary of State

Entity Name: DIRK, BILL & GARY IV, INC.

**Current Principal Place of Business:**

33 WEST CHURCH ST  
ORLANDO, FL 32801 US

**New Principal Place of Business:**

**Current Mailing Address:**

1813 MAPLE LEAF DR  
WINDERMERE, FL 34786

**New Mailing Address:**

FEI Number: 59-3087130      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

DIRK, BILL & GARY'S IV  
33 WEST CHURCH ST  
ORLANDO, FL 32801 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: P ( ) Delete  
Name: FARROW, DIRK,  
Address: 1813 MAPLE LEAF DR  
City-St-Zip: WINDERMERE, FL 34786

Title: SD ( ) Delete  
Name: NOLEN, GARY  
Address: 33 W CHURCH STREET  
City-St-Zip: ORLANDO, FL 32801

Title: D ( ) Delete  
Name: ROCKER, WALTER C  
Address: % 923 OAK STREET  
City-St-Zip: EATONTON, GA 31024

Title: D ( ) Delete  
Name: ROCKER, WILLIAM G,  
Address: 409 MAIDEN LANE  
City-St-Zip: SPARTAN, GA

Title: VP ( ) Delete  
Name: TAYLOR, ROBERT  
Address: 7280 HAWKSNEST BLVD  
City-St-Zip: ORLANDO, FL 32835

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

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

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

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

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

Title: VP (X) Change ( ) Addition  
Name: TAYLOR, ROBERT  
Address: 1813 MAPLE LEAF DR.  
City-St-Zip: WINDERMERE, FL 34786

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: DIRK FARROW

Electronic Signature of Signing Officer or Director

PRES

04/25/2008

\_\_\_\_\_ Date