

**2015 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F04000006076

**Entity Name:** DMD ENGINEERS, INC.

**Current Principal Place of Business:**

201 EAST TROY STREET  
ANDALUSIA, AL 36420

**Current Mailing Address:**

P.O. BOX 610  
ANDALUSIA, AL 36420

**FEI Number:** 20-1283643

**Certificate of Status Desired:** No

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

AGENTS AND CORPORATIONS, INC.  
300 FIFTH AVENUE SOUTH  
SUITE 101-330  
NAPLES, FL 34102 US

*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

**Officer/Director Detail :**

Title MEMBER  
Name DARNELL, PAUL E  
Address P.O. BOX 610  
City-State-Zip: ANDALUSIA AL 36420

Title VP  
Name HOLLAND, RUSSELL D  
Address P.O. BOX 610  
City-State-Zip: ANDALUSIA AL 36420

Title SD  
Name DARNELL, BRETT W  
Address P.O. BOX 610  
City-State-Zip: ANDALUSIA AL 36420

Title TD  
Name JACKSON, RICHARD S  
Address P.O. BOX 610  
City-State-Zip: ANDALUSIA AL 36420

Title PRESIDENT  
Name HUDSON, TROY M.  
Address P. O. BOX 610  
City-State-Zip: ANDALUSIA AL 36420

Title MEMBER  
Name FERRELL, PATRICK  
Address P.O. BOX 610  
City-State-Zip: ANDALUSIA AL 36420

*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:** TROY M. HUDSON

**PRESIDENT**

**02/10/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date