2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000007049

Entity Name: DAVID VALIGHAN INVESTMENTS INC

FILED Mar 17, 2004 Secretary of State

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Current Principal Place of Business:			New Principal Place of	New Principal Place of Business:	
5823 N. FC PEORIA, IL	REST PARK 61614	DR.			
Current Mailing Address:			New Mailing Address	New Mailing Address:	
5823 N. FC PEORIA, IL	REST PARK 61614	DR.			
FEI Number:	37-1272863	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:					
VAUGHAN 8754 LAKE ORLANDO	TIBET CT.	US	VAUGHAN, JO 8754 LAKE TIBET CT. CYPRESS POINT ORLANDO, FL 32836	US	
The above in the State		submits this statement for the pur	pose of changing its registered	d office or registered agent, or both,	
SIGNATURE: JO VAUGHAN				03/17/2004	
	Electron	ic Signature of Registered Agent	:	Date	
Election Cam	paign Financing	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS: ADDITION			ADDITIONS/CHANGE	S TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	CPT () VAUGHAN, DAV 5823 N. FORES PEORIA, IL 61	ST PARK DR.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	DV () WILLIAMS, LAV 5823 N. FORES PEORIA, IL 61	ST PARK DR.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () CHRISTENSEN 5823 N. FORES PEORIA, IL 61	ST PARK DR.	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	S () VAUGHAN, ANN 5823 N. FORES PEORIA, IL 61	ST PARK DR.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () SMARJESSE, F 5823 N FORES PEORIA, IL 61	T PARK DR	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () VAUGHAN, JO 8754 LAKE TIB ORLANDO, FL		Title: Name: Address: City-St-Zip:	()Change ()Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JO VAUGHAN D 03/17/2004