2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000007049

Entity Name: DAVID VAUGHAN INVESTMENTS, INC.

Current Principal Place of Business:

5823 N. FOREST PARK DR. PEORIA, IL 61614

Current Mailing Address:

5823 N. FOREST PARK DR. PEORIA, IL 61614

FEI Number: 37-1272863 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ROGERS, MARGARET L 160 E. TROTTERS DRIVE MAITLAND, FL 32751-5726 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: MARGARET L ROGERS 01/26/2016

Electronic Signature of Registered Agent

Date

FILED Jan 26, 2016

Secretary of State

CC8009639558

Officer/Director Detail:

Title DC: Title DP

VAUGHAN, DAVID Name Name WILLIAMS, LAWRENCE IV 8754 LAKE TIBET CT CYPRESS POINT Address 5823 N. FOREST PARK DR. Address

City-State-Zip: PEORIA IL 61614 City-State-Zip: ORLANDO FL 32836

VΡ Title Title **DSVP**

Name SHERIDAN, TODD Name CHRISTENSEN, BRIAN

Address 5823 N. FOREST PARK DR. 5823 N. FOREST PARK DR. Address

PEORIA IL 61614 City-State-Zip: PEORIA IL 61614 City-State-Zip:

Title

TREA Title VΡ Name SINCLAIR, JIM

Name SMARJESSE, PATRICK Address

5823 N FOREST PARK DR Address 5823 N FOREST PARK DR

City-State-Zip: PEORIA IL 61614 City-State-Zip: PEORIA IL 61614

Title DIRECTOR

SECRETARY Title Name BAUM, WAYNE

Name HOWARD, PATRICIA 5823 N FOREST PARK DRIVE Address

Address 5823 N FOREST PARK DRIVE City-State-Zip: PEORIA IL 61614

City-State-Zip: PEORIA IL 61614

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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.

01/26/2016 SIGNATURE: JIM SINCLAIR TREASURER/CCO

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title DIRECTOR

Name PILLMAN, VIRGINA

Address 5823 N FOREST PARK DRIVE

City-State-Zip: PEORIA IL 61614

Title CHIEF ADMINISTRATIVE OFFICER

Name PRICE, MICHAEL A

Address 5823 N FOREST PARK DRIVE

City-State-Zip: PEORIA IL 61614

Title DIRECTOR

Name MCCLURE, JOHN

Address 5823 N FOREST PARK DRIVE

City-State-Zip: PEORIA IL 61614