2017 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

Name and Address of Current Registered Agent:

BILBY, MARGARET L 160 E. TROTTERS DRIVE MAITLAND, FL 32751-5726 US Certificate of Status Desired: No

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 BILBY			01/12/2017
	Electronic Signature of Registered Agent			Date
Officer/Direc	ctor Detail :			
Title	DC	Title	DP	
Name	VAUGHAN, DAVID	Name	WILLIAMS, LAWRENCE IV	
Address	8754 LAKE TIBET CT CYPRESS POINT	Address	5823 N. FOREST PARK DR.	
City-State-Zip:	ORLANDO FL 32836	City-State-Zip:	PEORIA IL 61614	
Title	DSVP	Title	VP	
Name	CHRISTENSEN, BRIAN	Name	SHERIDAN, TODD	
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	TREA	
Title	VP	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	SECRETARY	Title	DIRECTOR	
Name	PRICE, MICHAEL	Name	BAUM, WAYNE	
Address	5823 N FOREST PARK DRIVE	Address	5823 N FOREST PARK DRIVE	
City-State-Zip:	PEORIA IL 61614	City-State-Zip:	PEORIA IL 61614	
		Cantinuas		

Continues on page 2

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: JIM SINCLAIR

TREASURER

01/12/2017

Electronic Signature of Signing Officer/Director Detail

Date

FILED Jan 12, 2017 Secretary of State CC5620073164

Officer/Director Detail Continued :

Title	DIRECTOR	Title	DIRECTOR
Name	PILLMAN, VIRGINA	Name	MCCLURE, JOHN
Address	5823 N FOREST PARK DRIVE	Address	5823 N FOREST PARK DRIVE
City-State-Zip:	PEORIA IL 61614	City-State-Zip:	PEORIA IL 61614
Title	CHIEF ADMINISTRATIVE OFFICER	Title	DIRECTOR
Title Name	CHIEF ADMINISTRATIVE OFFICER PRICE, MICHAEL A	Title Name	DIRECTOR DEWALT, MICHAEL
Name	PRICE, MICHAEL A 5823 N FOREST PARK DRIVE	Name	DEWALT, MICHAEL