

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 431032

FILED
Apr 21, 2009
Secretary of State

Entity Name: EATONVILLE DIVERSIFIED, INC.

Current Principal Place of Business:

15 WYMORE RD
EATONVILLE, FL 32751

New Principal Place of Business:

Current Mailing Address:

P O BOX 2185
EATONVILLE, FL 32751

New Mailing Address:

FEI Number: 59-1439169

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VEREEN, NATHANIEL JR
213 EATON ST
EATONVILLE, FL 32751 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: VEREEN, NATHANIEL JR
Address: 213 EATON ST
City-St-Zip: EATONVILLE, FL 32751

Title: VP () Delete
Name: VEREEN, ROSETTA G
Address: 15 KENNEDY AVENUE
City-St-Zip: EATONVILLE, FL 32751

Title: S () Delete
Name: FLOWERS, VALRIE
Address: 533 CLARK ST
City-St-Zip: EATONVILLE, FL 32751

Title: D () Delete
Name: BRYANT, GLORIE
Address: 7432 CITRUS AVE
City-St-Zip: SACRAMENTO, CA 95823

Title: T () Delete
Name: PARKER, ROSLYN
Address: 5147 LIGHTHOUSE RD
City-St-Zip: ORLANDO, FL 32808

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

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: NATHANIEL VEREEN JR

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04/21/2009

Electronic Signature of Signing Officer or Director

Date