2012 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 05, 2012
Secretary of State

DOCUMENT# H93693

Entity Name: CHERYL DANBOISE, INC.

Current Principal Place of Business:

11008 WINDCHIME CIRCLE
CLERMONT, FL 34711 US

New Principal Place of Business:

Current Mailing Address:

11008 WINDCHIME CIRCLE
CLERMONT, FL 34711 US

New Mailing Address:

FEI Number: 59-2655458 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DOUGLAS, LILLIAN
11008 WINDCHIME CIRCLE
CLERMONT, FL 34711 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

OFFICERS AND DIRECTORS:

Title: PD
Name: DOUGLAS, LILLIAN
Address: 11008 WINDCHIME CIRCLE
City-St-Zip: CLERMONT, FL 34711 US

Title: VPD
Name: DOUGLAS, STEVEN
Address: 6420 MATCHETT RD
City-St-Zip: ORLANDO, FL 32809 US

Title: T
Name: DOUGLAS, LILLIAN
Address: 11008 WINDCHIME CIRCLE
City-St-Zip: CLERMONT, FL 34711 US

Title: SD
Name: LAWRENCE HOLECEK
Address: 6234 MOORE STREET
City-St-Zip: ORLANDO, FL 328085 US

Title: D
Name: DANBOISE, CHERYL
Address: 17053 ARROWHEAD BOULEVARD
City-St-Zip: WINTER GARDEN, FL 34787 US

Title: D
Name: DANBOISE, THOMAS
Address: 17053 ARROWHEAD BOULEVARD
City-St-Zip: WINTER GARDEN, FL 34787 US

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: LILLIAN DOUGLAS PD 01/05/2012

Electronic Signature of Signing Officer or Director Date