

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K96277

FILED
May 02, 2008
Secretary of State

Entity Name: JAMES WEAVER DESIGN, INC.

Current Principal Place of Business:

% DARRYL J. TOMPKINS
2697 OAKTREE DR.
FT. LAUDERDALE, FL 33309

New Principal Place of Business:

Current Mailing Address:

% DARRYL J. TOMPKINS
2697 OAKTREE DR.
FT. LAUDERDALE, FL 33309

New Mailing Address:

FEI Number: 65-0144453 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TOMPKINS, DARRYL J.
14706 MAIN ST
ALACHUA, FL 32615 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: WEAVER, JAMES,
Address: 2697 OAK TREE DR
City-St-Zip: FT. LAUDERDALE, FL

Title: DS () Delete
Name: WEAVER, VALLI,
Address: 2697 OAK TREE DR
City-St-Zip: FT. LAUDERDALE, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: JAMES S. WEAVER

DP

05/02/2008

Electronic Signature of Signing Officer or Director

_____ Date