

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K96277

**FILED**  
**Apr 30, 2012**  
**Secretary of State**

**Entity Name:** JAMES WEAVER DESIGN, INC.

**Current Principal Place of Business:**

2697 OAKTREE DR.  
FT. LAUDERDALE, FL 33309

**New Principal Place of Business:**

2697 OAK TREE DR.  
FT. LAUDERDALE, FL 33309

**Current Mailing Address:**

2697 OAKTREE DR.  
FT. LAUDERDALE, FL 33309

**New Mailing Address:**

2697 OAK TREE DR.  
FT. LAUDERDALE, FL 33309

**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

**OFFICERS AND DIRECTORS:**

Title: DP  
Name: WEAVER, JAMES S  
Address: 2697 OAK TREE DR  
City-St-Zip: FT. LAUDERDALE, FL 33309

Title: DS  
Name: WEAVER, VALLI C  
Address: 2697 OAK TREE DR  
City-St-Zip: FT. LAUDERDALE, FL 33309

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: JAMES S WEAVER

DP

04/30/2012

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date