

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 06, 2008 8:00 am
Secretary of State

02-06-2008 90036 040 ***150.00

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1. Entity Name
FLORIDA EXECUTIVE VILLAS INCORPORATED



Principal Place of Business
**5 DIGSWELL HOUSE, MONKS RISE
WELWYN GARDEN CITY
HERTFORDSHIRE, FL ALB 7-NX**

Mailing Address
**5 DIGSWELL HOUSE, MONKS RISE
WELWYN GARDEN CITY
HERTFORDSHIRE ALB7NX ENGLAND, FL ALB 7-NX**

40019111



01272008 No Chg-P CR2E034 (11/05)

4. FEI Number
NOT APPLICABLE

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**POHL & SHORT, P.A.
280 WEST CANTON AVE., STE. 410
WINTER PARK, FL 32790**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HUNT, GRAHAME S 5 DIGSWELL HOUSE, MONKS RISE HERTFORDSHIRE ALB7NX ENGLAND,
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HUNT, JANET 5 DIGSWELL HOUSE, MONKS RISE HERTFORDSHIRE ALB7NX ENGLAND,
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**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Graham Hunt
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

President

Jan 25 2008

Date

Daytime Phone #