2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000026357

Entity Name: DAVID SCOTT ENTERPRISES, INC.

FILED Apr 18, 2009 Secretary of State

Current Principal Place of Business:			New Princ	New Principal Place of Business:	
1245 ARREDONDO GRANT RD. DELEON SPRINGS, FL 321303719					
Current Mailing Address:			New Mailing Address:		
1245 ARREDONDO GRANT RD. DELEON SPRINGS, FL 321303719					
FEI Number:	59-3632936	FEI Number Applied For ()	FEI Number Not Appli	licable () Certificate of Status Desired ()	
Name and	Address of Cu	rrent Registered Agent:	Name and	Address of New Registered Agent:	
	AVID :DONDO GRAN PRINGS, FL 32				
The above in the State		bmits this statement for the pur	pose of changing it	its registered office or registered agent, or both,	
SIGNATUR	E:				
	Electronic	Signature of Registered Agent		Date	
Election Cam	paign Financing T	rust Fund Contribution ().			
OFFICERS AND DIRECTORS:		ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	D () D SCOTT, DAVID 1245 ARREDOND DELEON SPRING		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () D SCOTT, JENNIFE 1245 ARREDOND DELEON SPRING	R	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	O () D SCOTT, NOAH L 1245 ARREDOND DELEON SPRING	O GRANT RD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	O () D SCOTT, LUKE B 1245 ARREDOND DELEON SRINGS	O GRANT RD	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	O () D TANNER, CHRIST 1933 BREWSTER DELTONA, FL 32	OPHER R R DR	Title: Name: Address: City-St-Zip:	O (X) Change () Addition TANNER, CHRISTOPHER R 621 JACKSON ST LAKE HELEN, FL 32744	
Title: Name: Address: City-St-Zip:	O () D TANNER, JACQUE 1933 BREWSTER DELTONA, FL 32	ELINE E R DR 738	Title: Name: Address: City-St-Zip:	O (X) Change () Addition TANNER, JACQUELINE E 621 JACKSON ST LAKE HELEN, FL 32744	
Statutes. 11	urther certify that	at the information indicated on t	his report or supple	or the exemption stated in Chapter 119, Florida emental report is true and accurate and that my hat 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: JENNIFER SCOTT

D 04/18/2009

Electronic Signature of Signing Officer or Director

Date