

**2008 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Aug 21, 2008 8:00 am**  
**Secretary of State**

07-18-2008 90016 006 \*\*\*150.00

**DOCUMENT #** **P0000004227**

**1. Entity Name**  
**Daigle Enterprises Inc**



**Principal Place of Business**  
1787 NW PALMETTO TERRACE  
STUART, FL 34994

**Mailing Address**  
1787 NW PALMETTO TERRACE  
STUART, FL 34994

66016040



**DO NOT WRITE IN THIS SPACE**

**No Chg-P** **CR2E034 (11/05)**

**4. FEI Number**  
**62-1816933**

**Applied For**  
**Not Applicable**

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

**6. Name and Address of Current Registered Agent**

**Daigle Enterprises Inc**  
**1787 N.W. Palmetto Terr**  
**Stuart Fl. 34994**

**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 renewing)*

**DATE**

*Signature*

**7-14-08**

**FILE NOW!! FEE IS \$150.00**  
**Due by September 12, 2008**

**9. Election Campaign Financing** ☐ **\$5.00 May Be Added to Fees**

**150.00**

10. OFFICERS AND DIRECTORS	
<b>TITLE</b>	<b>D</b>
<b>NAME</b>	<b>Louise Daigle</b>
<b>STREET ADDRESS</b>	<b>1787 N.W. Palmetto Terr</b>
<b>CITY - ST - ZIP</b>	<b>Stuart Fl. 34994</b>
<b>TITLE</b>	<b>D</b>
<b>NAME</b>	
<b>STREET ADDRESS</b>	
<b>CITY - ST - ZIP</b>	
<b>TITLE</b>	
<b>NAME</b>	
<b>STREET ADDRESS</b>	
<b>CITY - ST - ZIP</b>	
<b>TITLE</b>	
<b>NAME</b>	
<b>STREET ADDRESS</b>	
<b>CITY - ST - ZIP</b>	

**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:**

*Signature and typed or printed name of officer or director*

**Date**

**Daytime Phone #**

*Signature*

**7-14-08**

ATTACHMENT

66016025

To whom it may concern, # P00000042279  
I did not receive the first annual report notice to file.  
I called and was told to send this back with my  
downloaded copy and ask for a waiver of the  
\$400.00 late fee.  
Thank you for your understanding.

Sincerely,  
Louise Daigle